

OSHDP

OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT



California Health Facility Construction Loan Insurance Program

State Plan

State of California

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for the

California Health Facility Construction Loan Insurance Program

Introduction and Purpose

Created in 1969 and modeled after federal home mortgage programs, the California Health Facility Construction Loan Insurance Program (**Program**) enables public and nonprofit healthcare facilities to obtain private financing, without cost to taxpayers, to develop or expand their services in communities throughout California.

The Program's objective is to stimulate the flow of private capital into non-profit and public health facility construction in order to assure accessibility to needed healthcare.

With the passage of AB 282 in October 1999, Section 129020 of the Health and Safety Code was amended to require that the Office of Statewide Health Planning and Development (**OSHPD**) develop a state plan every odd-numbered year for the Program. (See **Exhibit 1**)

In this State Plan (**2001 State Plan**), it is the intent of OSHPD to provide a summary of the Program, identify current trends that affect the Program, and specify goals and objectives in order to continue to focus the Program on equitable healthcare accessibility for California.

Section I Status Report of the Loan Insurance Program

A. History of the California Health Facility Construction Loan Insurance Program - First Thirty Years

The California Health Facility Construction Loan Insurance Program (**Program**) was authorized in 1968 by an initiative vote, which added the following section to the State Constitution (reference Article 16, Section 4):

"The Legislature shall have the power to insure or guarantee loans made by private or public lenders to nonprofit corporations and public agencies, the proceeds of which are to be used for the construction, expansion, enlargement, improvement, renovation or repair of any public or nonprofit hospital, health facility, or extended care facility, facility for the treatment of mental illness, or all of them, including any outpatient facility and any other facility useful and convenient in the operation of the hospital and any original equipment for any such hospital or facility, or both."

Legislation enabling the Program was passed by the Legislature in 1969.

Modeled after federal home mortgage programs, the Program has made it possible for nonprofit healthcare facilities to obtain private financing without cost to taxpayers to develop or expand their services in communities throughout California. Without such a guarantee, many of these facilities simply could not arrange the financing required to serve their communities.

Under the administration of the Office of Statewide Health Planning and Development (**OSHDP**), the California Health Facility Construction Loan Insurance Program insures loans to nonprofit and public health facilities for construction projects that improve access to needed healthcare. OSHDP can insure loans to nonprofit public benefit corporations or public entities (cities, counties, hospital districts, or joint power authorities) in which the State of California guarantees the payments of principal and interest on the loans. The loan insurance allows access to lower interest rates, similar to the tax exempt bond rates available to the State.

The California Health Facility Construction Loan Insurance Law established the Health Facility Construction Loan Insurance Fund (**Insurance Fund**). The Insurance Fund is used as a depository of fees and insurance premiums. The Insurance Fund may be used to pay administrative costs of the Program and shortfalls resulting from defaults by insured borrowers. As a trust fund, the Insurance Fund and the interest (or other earnings) generated may not be used for non-Program purposes.

The Program was validated by the California Supreme Court in 1971, which determined that both the Constitutional amendment and the enabling legislation creating the Program were constitutional.

In 1972, OSHPD insured its first loan, with the full faith and credit of the State guaranteeing the loan.

The enabling legislation required OSHPD to develop a plan and allocate loan insurance based on its findings, so needed health facilities would be constructed or expanded. OSHPD originally used Hill-Burton planning documents as the Plan.

In 1976, the Certificate of Need laws were enacted, which required health facilities to go through an independent review process to assure that community need existed for the project prior to construction. During the years the Certificate of Need program was active, the statutes were amended to delete the separate planning requirement. In 1979, the statutes were revised to require that a Certificate of Need or a Certificate of Exemption be obtained as a condition to eligibility for loan insurance.

When the Certificate of Need program was suspended in 1987, OSHPD requested the California Health Policy and Data Advisory Commission (**CHPDAC**) to form a task force to assess the continuing need for the Program. While the task force concluded that the Program continued to perform a valuable function, it recommended that: (1) there should be a total dollar cap on the Program, that could be re-evaluated periodically by the Legislature; and (2) the Program should be guided by some kind of non-regulatory state plan.

OSHPD sought legislation to implement these two recommendations. Senate Bill 1293, passed in 1989, established the requirement for OSHPD to develop a state plan and allocate resources according to that state plan. At the same time, a \$2 billion cap on loan guarantees was established.

During 1991, the cap on loan guarantees was raised to \$2.5 billion. The legislation also provided that the cap could be raised to \$3 billion, with the completion of a state plan. The first State Plan was finished in July 1992. Effective January 1, 1993, the amount that OSHPD was authorized to insure was raised to \$3 billion.

When Triad Healthcare Corporation (**Triad**) defaulted on an insured loan of \$167 million, in September 1993, OSHPD declared a moratorium on new applications. When a review of the Program found that OSHPD could continue to meet the requirement that the Program be administered without cost to the State, the moratorium was lifted and OSHPD began accepting new applications in May 1994.

During the moratorium, the Advisory Loan Insurance Committee (**ALIC**) was restructured. OSHPD appointed new members to the Committee, including a representative from the Department of Finance. In 1995, regulations were amended to increase the number of members on the ALIC from seven to nine.

In order to strengthen the Program's ability to deal with facilities in serious financial trouble, Senate Bill 1705 was passed in September 1994 which specifically authorized OSHPD to direct management of an insured health facility.

B. Developments since the 1995 State Plan

1. Changes in the Program's Portfolio

Since 1995, the Program's portfolio has declined in size. The amount of insured loans reached \$2.06 billion in 1994 (**Exhibit 12**) and the number of loans insured peaked at 228 in 1996 (**Exhibit 13**). On June 30, 2001, the amount of insured loans was \$1.04 billion and the number of loans was 182 (**Exhibit 2**).

Three general factors explain the decline. (1) After the Triad default and the moratorium of loan insurance approvals, OSHPD shifted priorities, as reflected in the 1995 State Plan. Hospital projects were de-emphasized. Primary care clinics and community based programs, particularly those targeting underserved populations, were designated a priority need. (2) During the period 1995 – 2000, healthcare facilities focused on cost containment due to reduced reimbursement. Hospitals and skilled nursing facilities, generally, scaled back on construction projects. (3) As interest rates were declining (until 1999), borrowers were able to refinance out of the Program and still achieve lower interest costs. These three factors contributed to, both, a decrease of the amount insured risk (**Exhibit 12**) and a decrease in the total number of insured loans (**Exhibit 13**).

The profile of the insured portfolio also has changed. The proportion of hospitals to the total declined from 38 percent in July 1992 to 29 percent in December 1995; to 15 percent in June 2001.

At the same time, the proportion of the portfolio related to smaller, community-based projects (primary care clinics, chemical dependency and recovery facilities, group homes, mental health programs, etc.) increased. These projects represented 39 percent of the total in July 1992; 47 percent in December 1995; and 66 percent in June 2001. (see **Exhibits 11 & 17**)

The 1995 State Plan established certain priorities, which are indicated in the following summary listing. Loan insurance activities since 1995 have reflected those priorities. From January 1996 through June 2001, OSHPD insured 39 projects. (Since a project may address more than one priority area, the combined total of all priority areas exceeds 39.)

- 1) Nine (9) projects were in medically underserved areas or projects that serve medically underserved populations.
- 2) Seven (7) projects promoted access to primary care services.
- 3) Twenty-nine (29) projects targeted special needs populations and created community-based treatment environments: twelve (12) projects for the elderly, seven (7) projects for persons with mental disabilities, five (5) projects for persons with developmental disabilities, and nine (9) projects for children.
- 4) Five (5) projects promoted the development of healthcare services in rural areas.
- 5) Two (2) projects provided integrated services for persons with AIDS / HIV.
- 6) Three (3) projects provided innovative solutions to healthcare delivery problems by integrating services with community agencies and community programs.
- 7) Three (3) projects included opportunities to refinance debt and reduce the borrower's risk to the Program's insurance fund.

Exhibit 5 shows the projects that have been insured since completion of the 1995 State Plan (January 1996) through June 2001.

2. State Auditor's Report

In October 1998, a report by the California State Auditor identified opportunities to improve the review of applications and the monitoring of insured borrowers.

OSHPD has addressed the recommendations in the Auditor's report. The most significant accomplishments include: (1) establishing written guidelines for the review of loan applications; (2) customizing financial analysis software to support analyzing an applicant's financial performance; (3) upgrading and reprogramming the project database to assist the staff and Program management in monitoring borrowers; and (4) preparing, in conjunction with OSHPD Accounting staff, reports of assets and liabilities related to defaulted projects.

3. New Legislation

During the 1998 -1999 Legislative session, a cooperative effort by the State Legislature, the State Auditor's staff, and OSHPD staff resulted in passage of AB 282 (Chapter 848, Statutes of 1999).

The statutes implemented provisions to improve the Program. Key items included:

- 1) Development of a more comprehensive system for assessing an applicant's financial risk.
- 2) Development of a more comprehensive system of monitoring financial performance of insured borrowers.
- 3) Establishment, in law, of the Advisory Loan Insurance Committee with expanded responsibilities, including Program oversight and policy recommendations.
- 4) Authorization to adopt a one-time, up-front insurance premium.
- 5) Preparation of a biennial State Plan.
- 6) Preparation of annual reports to the Legislature on (a) the financial status of the Program and its insured portfolio and (b) whether applicants and borrowers are meeting the community service obligation requirements.

In addition, AB 549 (Chapter 825, Statutes of 1999) designated OSHPD to coordinate California's participation with the Federal healthcare facility loan insurance program (HUD 242 Program). This program is similar to California's Loan Insurance Program, except that it is available to both investor and non-profit hospitals.

C. Description of Program Operations

1. Administration

As one of fourteen departments in the California Health and Human Services Agency, OSHPD's vision is "equitable healthcare accessibility for California." Its mission is to be a leader in analyzing California's healthcare infrastructure, promoting a diverse and culturally competent healthcare workforce, informing the public about healthcare quality, assuring the safety of buildings used in providing healthcare, providing funds that insure loans for non-profit "safety net" facilities, and facilitating development of sustained capacity for communities to address local healthcare issues.

OSHPD administers the California Health Facility Construction Loan Insurance Program through its Cal-Mortgage Loan Insurance Division (**Cal-Mortgage**). For Fiscal Year 2001-02, the Cal-Mortgage Loan Insurance Division was authorized for 28 employees and an annual budget of \$4.3 million.

OSHPD has established an Advisory Loan Insurance Committee (**ALIC**) to provide technical review and analysis of applications. The ALIC independently recommends to the OSHPD Director regarding whether an application should be approved and whether conditions should be attached to the approval. The ALIC also assists the OSHPD Director in formulating policy and in providing advice for the State Plan. The ALIC is comprised of nine members. Seven members are citizens with expertise in areas of finance, healthcare facility management, and construction. Two members are appointed from State government, one of which is appointed by the Director of Finance.

OSHPD also is assisted by the California Health Policy and Data Advisory Commission (**CHPDAC**). The CHPDAC gives OSHPD and the Cal-Mortgage Loan Insurance Division general advice by periodically reviewing the Program, providing advice on the State Plan, and serving as a review body for applicants whose applications for loan insurance are denied by OSHPD. Since the Program's inception in 1972, one hearing has been requested and conducted.

The California Health Facility Construction Loan Insurance Law, also, established the Health Facility Construction Loan Insurance Fund (**Insurance Fund**). The Insurance Fund is used as a depository of fees and insurance premiums. It is invested in the California State Pooled Money Investment Account Portfolio managed by the State Treasurer and earns interest equivalent to the rate earned by other State Treasury funds. The Insurance Fund is a trust fund and may only be used to pay administrative costs of the Program and shortfalls resulting from defaults by insured borrowers. As a trust fund, the Insurance Fund and the interest (or other earnings) generated may not be used for non-Program purposes (**Exhibit 14**).

OSHPD contracts for actuarial and consultant services. It obtains legal services from the State Attorney General's Office and from private law firms for specific matters.

Cal-Mortgage staff provide reports to OSHPD's Director, the California Health and Human Services Agency (**CHHSA**), and the State Legislature. Cal-Mortgage staff prepare monthly and annual reports showing Program activity, the cash balance of the Insurance Fund, and, in conjunction with OSHPD Accounting staff, the assets and liabilities of the Program (**Exhibit 2**). Cal-Mortgage staff submit bi-monthly reports to CHHSA and Week Ahead Reports to OSHPD administration of anticipated events. In odd-numbered years, OSHPD contracts for an actuarial study of the Program (refer to Section I D for a summary of these reports). For fiscal year ending June 30, 2000, OSHPD prepared two annual reports for the Legislature: (1) Financial Status of the Program and (2) Borrowers' Compliance with their Community Service Obligations.

Reports on the activity of the Program are published monthly and are available upon request or on the OSHPD website (www.oshpd.state.ca.us/calmort).

2. Application Process

All applicants for loan insurance proceed through an application and credit evaluation process. The process for reviewing applications for loan insurance comprises seven steps. By structuring the process in several steps or stages, the goal is to make determinations about an application as early in the process as possible. In this way, if an application is not approvable, the applicant's costs are kept to a minimum.

1) In the preliminary application review, a Project Officer in Cal-Mortgage determines eligibility of the applicant for loan insurance and generally assesses the community need for the facility and the feasibility of the proposed project.

2) The next step consists of the applicant submitting a specific set of application documents intended to expand on and confirm the information included in the preliminary review discussed above. To initiate this second stage, the applicant must submit a \$500 non-refundable application fee.

3) The third step is the submission of a complete application. The key question under consideration at this stage is whether the proposed project is financially feasible. Following written guidelines, Cal-Mortgage staff assesses the project and financial projections. The applicant's financial performance is analyzed with a customized financial analysis software computer program that compares the applicant's financial performance with similar types of health facilities.

Cal-Mortgage staff also reviews other factors, including reasonableness of the project scope, community need, management expertise of the applicant's executive staff, and collateral. The applicant describes the community needs the healthcare facility will meet and provides data and information to substantiate the stated need. The Project Officer assesses the proposed project's consistency with the State Plan. Finally, the Project Officer conducts a financial sensitivity analysis, using different levels of need and reimbursement to assess changes in the proposed project's financial feasibility.

The Project Officer writes a Project Summary and Feasibility Analysis (**PS & FA**). The PS & FA includes a recommendation about approval of the application and a proposed set of conditions. At this stage, the application is scheduled for review by the Advisory Loan Insurance Committee (**ALIC**).

4) The fourth step is review, in a public meeting, of the application by the ALIC. This review provides an independent analysis of the project, and a forum for consideration of input from the general public. The ALIC votes on whether to recommend the project for approval to the Director and, if so, whether the

applicant should be required to meet specific conditions prior to final issuance of the loan guarantee.

5) Following the Advisory Loan Insurance Committee meeting, the Director of OSHPD makes a decision to approve or disapprove the application.

If the Director concurs with the recommendation of the Cal-Mortgage staff and the Advisory Loan Insurance Committee to approve the application, OSHPD will issue a preliminary letter of commitment specifying any conditions the applicant must meet prior to the final issuance of loan insurance.

If the Director decides to guarantee a loan that the Advisory Loan Insurance Committee recommended not to insure, the Director will notify the Secretary of the California Health and Human Services Agency and document, in writing, the programmatic or policy reasons for his decision. The Secretary may request that the California Health Policy and Data Advisory Commission (**CHPDAC**) conduct a hearing to review the application, the ALIC recommendation, and the Director's decision. If there is a hearing, CHPDAC makes its recommendation to the Secretary. At any point in this review process, the Secretary may decide to sustain the decision, modify the loan insurance guarantee, deny the application, or direct re-review by Cal-Mortgage staff or the ALIC.

If the application for loan insurance is denied, the applicant may petition for a fair hearing before the California Health Policy and Data Advisory Commission.

6) The sixth step involves the sale of the bonds or certificates of participation. At this stage, the applicant must provide OSHPD with documentation that conditions contained in the commitment letter have been met.

7) The seventh and final step is the close of escrow, at which point the loan is made and loan insurance is effective. Loans are secured by a first mortgage, first deed of trust or other first priority lien. Borrowers are also subject to security agreements, which specify conditions, covenants, and restrictions.

For a listing of insured projects, see **Exhibit 4**.

A listing of projects by facility type is included, as **Exhibits 7 & 8**. And, a listing of projects by county is included, as **Exhibits 9 & 10**.

3. Program Fees and Charges

The Program charges an application fee (\$500), a one-time certification and inspection fee of four tenths of one percent (0.4 percent) of the insured loan, and an insurance premium fee. Effective January 1, 2001, the insurance premium for new loans is a one-time amount not to exceed three percent of total principal and interest on the loan. Regulations, adopted in March 2001, allow for a discounted

premium rate for those applicants who obtain a credit rating or assessment from Standard & Poor's, Moody's, or Fitch.

4. Project Monitoring

Following the close of escrow, OSHPD's Cal-Mortgage staff monitor a borrower for compliance with loan covenants. The Project Officer reviews periodic financial reports, payment information, and insurance coverage. The Project Officer visits the facility site in order to be assured of the continuing solvency of the borrower and the on-going ability to make timely payments.

The monitoring process is intended to detect, as early as possible, potential problems. If a problem is detected, the Project Officer and Cal-Mortgage management assist the borrower in resolving the financial problem.

Cal-Mortgage staff monitor all borrowers and assigns a risk rating (A to F) to each project. Risk ratings may be revised during the year as circumstances relating to a borrower change. The risk ratings have a corresponding relationship to various stages of default:

- | | |
|---|--------------------------------------|
| A | no problems |
| B | minor problems |
| C | moderate problems |
| D | serious problems; missed payments |
| E | default anticipated |
| F | defaulted; Insurance Fund being used |

A computer database is maintained about all borrowers and insured projects. Various monitoring reports are produced for Cal-Mortgage staff. The computer database also produces letters to borrowers if they have not provided required reporting documents.

5. Remedies for Projects with Problems

When an insured borrower fails to submit a required report or upon default of the contractual terms or covenants, OSHPD informally communicates with the facility's management or borrower. If the borrower fails to submit the required report or correct the default, OSHPD sends a formal notice in writing stating the nature of the default. OSHPD's approach is to solve the problem by working with the facility's Governing Board and management to develop a plan of correction. To facilitate communication and collaboration, the Project Officer may visit the facility. If the borrower fails to submit a plan or submits a plan that is unacceptable to OSHPD, then OSHPD conducts an onsite visit. If OSHPD determines that the borrower is not making sufficient progress in submitting required reports or correcting defaults, OSHPD with the approval of the Director, may require the borrower, at the borrower's expense, to employ an independent

consultant to conduct an audit of the facility's performance and make recommendations.

6. Other Practices to Lower Insurance Risk in the Program

OSHPD requires the borrower, through the Contract of Insurance, to certify periodically that the financial performance of the healthcare facility meets or exceeds specific financial ratios. OSHPD, also, generally restricts the borrower from obtaining additional debt or selling facility assets without OSHPD's approval.

OSHPD requires the borrower to maintain property and casualty insurance, such as fire, boiler, earthquake, and liability (malpractice).

OSHPD protects the Program and the Insurance Fund from the potential insolvency of a borrower by requiring a debt service reserve fund, equal to one year's payments.

D. Provisions to Assist Small Facilities

Health and Safety Code Section 129355 (d) states that any State Plan shall identify impediments that preclude small facilities from utilizing the California Health Facility Construction Loan Insurance Program and shall include programmatic remedies to enable small projects to utilize the Program. Based upon Section 129355 (b), small facilities are defined as those with projects which are less than \$5 million.

The 1995 State Plan identified several measures that were implemented:

- Application process revised for document submission in steps.
- Loan commitment extended to twelve months.
- Financial feasibility workbook developed for projects under \$300,000.

OSHPD believes that these efforts (along with others) have substantially removed barriers for small projects. In the 2000-2001 Fiscal Year, seven of the nine new insured projects were under \$5 million. Since the previous State Plan (from January 1996 to June 2001), OSHPD insured 42 projects. Twenty-two were under \$5 million or approximately half of the total projects. Overall, the portfolio also has changed to smaller types of healthcare facilities. The proportion of the portfolio related to smaller, community-based projects (primary care clinics, chemical dependency and recovery facilities, group homes, mental health programs, etc.) has increased significantly. These projects represented 39 percent of the total in July 1992; 47 percent in December 1995; and 66 percent in June 2001. (see **Exhibits 11 & 17**)

For small facilities, some impediments are systemic, relating to facilities being small and the infrequency of undertaking projects with construction and financing. Two impediments that continue to preclude utilization of the Program are unawareness of the Program and the effort to submit an application.

Generally, small facilities have small management teams and boards that concentrate on the daily operations essential to their mission. The occasions for construction (or expansion) together with finding financing are infrequent. As a result, the leaders of small healthcare facilities are unaware of the existence and potential benefits of the Program.

- OSHPD will continue to maintain and develop outreach efforts to various provider trade associations.
- OSHPD staff will use project field visits as opportunities to network and develop new contacts with bankers and feasibility consultants.

Another attribute of small facilities is “small” budgets. Small facilities do not typically have funds to hire consultants to assist them with the preparation of the loan insurance application. Also, small healthcare facility managers have relatively less time available to become familiar with the process and to complete the loan application.

- OSHPD will continue to provide technical assistance to small facilities with limited expertise and resources.
- OSHPD staff will continue to advise managers of small facilities about effective and efficient ways to submit the application information.

Although OSHPD has had success in providing loan insurance to a number of small facilities, healthcare delivery is constantly changing and evolving. To assure equitable accessibility, it remains important for OSHPD to continue to monitor the kinds of projects and to continuously be alert for new impediments and the corresponding remedies. (see **Exhibit 6**)

E. Actuarial Studies

When the Program was established in 1969, it was not funded with a capital reserve fund, as the Program was backed by the full faith and credit of the State. With the receipt of premiums and fees since 1972, the Insurance Fund had grown to approximately \$152 million at the end of the Fiscal Year 2000 - 01 (**Exhibits 2 & 14**). In spite of the defaults discussed in Section I F of this State Plan, the Insurance Fund has generally been increasing.

Since 1992, OSHPD has contracted every even numbered year for an actuarial study.

2000 Actuarial Report

The most recent actuarial study was conducted by Milliman & Robertson, Inc. Their report, completed in March 2001, addressed the following objectives:

- determine the reserve sufficiency of the funds in the Insurance Fund as of June 30, 2000,
- assess the risk to the State's General Fund of the Cal-Mortgage Program.

As to the first issue, Milliman & Robertson concluded that assuming "normal and expected" conditions, the HFCLIF should maintain a positive balance over the long term (i.e., at least the next thirty years). As to the second issue, Milliman & Robertson found that the only risk to the General Fund would derive from its most pessimistic scenario, which is a ten percent annual probability of a catastrophic claim. Milliman & Robertson noted that such a scenario is highly unlikely and that, even if it did occur, the Program would still have funds for twenty years.

F. Defaulted Loans Requiring Payments from Insurance Fund

Prior to the 1995 State Plan, four loans insured by OSHPD had defaulted, resulting in payments from the Insurance Fund. Since 1995, five loans have defaulted. (see **Exhibit 3**) A brief description for each of the defaults (listed in chronological order of payments from the Insurance Fund) follows:

CACCOA. Community Adult Care Centers of America (**CACCOA**) was a non-profit corporation that planned to acquire a 78-bed SNF in Long Beach, an 83-bed board and care facility in Los Angeles, and adjacent sites at each location to construct additional facilities. In 1990, OSHPD insured this project for \$10.0 million.

Due to CACCOA's failure to develop the project as required, OSHPD declared it in default in May 1992. OSHPD paid approximately \$4.5 million from the Insurance Fund. In July 1992, OSHPD instituted legal proceedings to recover expended funds. In a settlement agreement, reached in 1999, the assets were sold to unrelated parties for approximately \$1.5 million. OSHPD is currently receiving payments from the note on this sale.

Lytton. In 1981, OSHPD insured a \$9.6 million loan to Lytton Gardens to construct a 120-bed multi-story skilled nursing facility in Palo Alto.

In 1994, due to operational problems, Lytton defaulted on two loan payments. OSHPD made these two payments from the Insurance Fund. Since then, Lytton has made its monthly debt service payments. In December 1999, the insured loan was refinanced, which included full

repayment with interest to the Insurance Fund. Lytton continues to make timely payments.

Triad. Triad Healthcare Corporation was a non-profit corporation formed to purchase two hospitals in Sherman Oaks and Canoga Park from a for-profit corporation. In 1991, OSHPD insured \$142,000,000 in short-term taxable notes to acquire the hospitals.

In 1993, Triad defaulted on its loan as a result of losses from operations. In February 1994, Triad filed for Chapter 11 protection in Federal Bankruptcy Court. In April 1995, the borrower, renamed as Sherman Oaks Health System, exited bankruptcy and continued operating Sherman Oaks Hospital and Medical Center. The other hospital facility (West Valley Hospital) was sold with the proceeds going to the Insurance Fund. The bankruptcy court restructured Triad's obligation to OSHPD. OSHPD is responsible for making the payments on the restructured debt. OSHPD filed lawsuits against individuals and entities involved in the Triad financing to recover damages. OSHPD has received settlements of approximately \$32 million, with an additional \$20 million expected by 2002. As of June 30, 2001, OSHPD and hospital management were discussing the need to restructure the current outstanding debt.

Los Medanos. In 1990, OSHPD insured a \$11.1 million loan to the Los Medanos Health Care Corporation, a healthcare district in Pittsburg. The project was to renovate and expand Los Medanos Community Hospital, pay off existing debt, and provide funds for future capital projects.

In 1994, Los Medanos defaulted on the loan and subsequently filed for Chapter 9 bankruptcy. A settlement agreement was signed in September 1998. Taxpayers in the healthcare district continue to pay property taxes, in order to repay amounts due OSHPD in the settlement agreement.

Healthcare Delivery Systems. In 1992, OSHPD insured a \$9,930,000 loan to Healthcare Delivery Services (**HCDS**) for the acquisition of a group home for emotionally disturbed children on a 2.68-acre campus in Van Nuys.

As a result of a variety of problems, the facility license was suspended and clients were moved to other facilities. Unable to operate the facility, HCDS defaulted on its loan. Since 1995, payments have been made from the Insurance Fund. In November 1997, OSHPD foreclosed and took title to the property. In December 2000, OSHPD accelerated the debt and repaid the outstanding bonds.

Villa View. In 1984, OSHPD insured a \$6.9 million loan to Villa View Community Hospital, a 100-bed acute care hospital with psychiatric services in San

Diego. The project was to refinance a prior bond issue, remodel the hospital, and acquire equipment.

As a result of operational problems, Villa View defaulted on its bond payments in August 1997. OSHPD foreclosed and sold the hospital. The original bonds have been paid off. The new owner has filed for bankruptcy and negotiations are underway to sell the facility.

Third Floor. In 1991, OSHPD insured a loan totaling \$3.2 million to the Third Floor for the purchase of land and buildings for a residential substance abuse facility in Fresno.

In the mid-1990s, this program's federal funding was reduced. The project was unable to make mortgage payments from 1996 - 1998. In April 1998, OSHPD declared the loan to be defaulted. The loan was paid off. The building was sold, with partial repayment made to the Insurance Fund. The Third Floor continued its other operations and made regular payments to the Insurance Fund. In April 2001, the Third Floor obtained new financing and made a full repayment.

Hernandad. In 1994, OSHPD insured a \$4,385,000 loan to Hernandad Mexicana Nacional, Inc. to acquire, renovate, and purchase equipment for two primary care and dental clinic properties located in Los Angeles and North Hollywood.

Hernandad failed to open the clinics and, as a result of a deteriorating financial condition, stopped making loan payments in 1998. Since December 1998, OSHPD has paid the semi-annual payments from the Insurance Fund. In May 1999, the East Los Angeles Health Task Force began operations in the Los Angeles clinic, without making any debt service payments. OSHPD continues to work to find an acceptable solution that provides for debt service payment, while providing primary care services to the community.

Kazi House. In August 1991 and January 1992, OSHPD insured two loans totaling \$2.67 million to Kazi House for a 120-bed residential drug and alcohol facility in South Central Los Angeles.

The facility experienced low census beginning in 1994 after losing its contract with the Department of Corrections. Kazi tried, with OSHPD's support, to develop new relationships with various entities that could provide assistance or potential referrals. All efforts failed. In December 1999, OSHPD sent Kazi a Notice of Default. OSHPD began making payments from the Insurance Fund. In March 2000, OSHPD discovered that Kazi had ceased operations and abandoned its facility. OSHPD petitioned the Los Angeles Superior Court to appoint a receiver and

commenced foreclosure. In December 2000, OSHPD paid off the bondholders. OSHPD has hired an agent to market the facility for sale.

OSHPD staff will continue to manage defaulted loans in order to minimize financial impact to the Program.

G. Partnership with Other State Agencies

Since projects insured by OSHPD often rely heavily on state, federal, or local government funding, OSHPD coordinates its loan insurance activities within the program priorities of other State agencies.

OSHPD obtains letters from State and local departments that provide the principal source of funding to the applicant, documenting that the applicant's project is consistent with the program plans of the funding source.

OSHPD has regular discussions with the licensing divisions and the reimbursement divisions of the Department of Health Services, the Department of Social Services, and the Department of Alcohol and Drug Programs.

Section II. Evaluation of the Program's Success in Meeting Its Mission

The purposes of the Program are twofold: (1) to provide, without cost to the State, a loan insurance program for health facility construction, improvement, and expansion projects, thus increasing the availability of private capital for health facilities; and (2) to rationally meet the need for new, expanded, or modernized public and nonprofit health facilities necessary to protect the health of all Californians. The provisions of the California Health Facility Construction Loan Insurance Law are to be "liberally construed" to achieve these purposes. (Health & Safety Code Section 129005)

Without Cost to the State of California

The Program has operated since 1972, insuring over \$4 billion in loans to more than 400 healthcare facilities, many in rural and underserved areas of the State.

The Program is entirely self-supporting from its insurance premiums and related incomes. It has a current Insurance Fund cash balance of \$152 million. In 29 years, nine defaults have occurred that required payment from the Insurance Fund. The Program has operated without expenditures from the State General Fund.

According to the 2000 Actuarial Report, the Program is projected to remain solvent under normal operating conditions (without catastrophic losses) and operate without cost to the State through the forecast period of 2020.

To Meet the Need for Facilities

The basic purpose of meeting healthcare facility construction needs has not changed over the years. What has changed is the paradigm by which healthcare is being delivered. This has had an effect on the type of healthcare facilities that are needed.

In order to reflect California's changing needs, the statutory definition of eligible "health facility" has been expanded over time. While originally focusing on hospitals (and those facilities that were necessary adjuncts to hospitals), California has recognized that some services, which traditionally were delivered in the hospital or other institutions, have moved out and become separate facilities. Today, many different types of health facilities are eligible for loan insurance, such as community care facilities, primary care clinics, specialty care clinics, substance abuse treatment facilities, group homes, skilled nursing facilities, and "multi-level" facilities designed to prevent institutionalization of the elderly. (see **Exhibits 7, 8, 15, & 16**)

OSHPD loan insurance activities have changed to reflect California's changing health needs. The 1995 State Plan concluded that the changing healthcare

market place called for refocusing the Program toward smaller projects, such as primary care clinics, substance abuse treatment facilities, and community based mental health programs. From adoption of the 1995 Plan through December 2000, such smaller projects have represented over 56 percent of all the projects insured during the period. This re-adaptation of OSHPD's review and project approval processes and the resulting increase in smaller projects reflect the continuing relevance of the Program to the healthcare market place.

Commitment to Mission

OSHPD and the Cal-Mortgage staff remain committed to continuing the careful management of the Program in order to benefit communities throughout California, at no cost to State taxpayers.

Section III. Overview of Trends in Healthcare

Many trends are affecting healthcare facilities. These trends also affect the operations of the Program. OSHPD views the following issues as those which currently have significant impact on the Program:

- Access to healthcare for Californians.
- Growth in the number of older adults.
- Hospital implementation of seismic safety requirements.
- Financial solvency challenges.
- Opportunities for community based programs.
- Strong governance and good management are still critical for success.

A. Access to Healthcare for Californians

Areas of California, both rural and urban, have unmet healthcare needs. Many factors contribute to this need, including poverty, lack of health insurance, shortages of healthcare personnel, and geographic barriers.

The number of Californians without health insurance was 6.8 million in 1999. The uninsured, particularly those without coverage for more than a year, are less likely to receive care for chronic health problems that require frequent monitoring and have lower rates of disease screenings and preventive care.

The State recognizes that there are unmet needs by supporting programs and services specifically targeted to populations and areas in great need. The State Budget, by targeting such issues as childhood immunizations and supporting access to primary care services for children through the Healthy Families Program, reflects California's commitment to all of its residents.

OSHPD and the State Department of Health Services have collected data and developed a methodology that ranks the 482 rural and urban medical service study areas in California relative to their need for primary care services. **Exhibit 21** is a map showing those areas of critical need throughout California. A total of 9.1 million Californians, nearly one-third of the State's total population, reside in those areas of critical need. In addition, OSHPD in cooperation with the federal government identifies areas in the State that have a shortage of primary care physicians. These areas are called "Health Professional Shortage Areas." **Exhibits 18, 19, and 20** are maps of these areas throughout the State.

OSHPD, through the California Health Facilities Construction Loan Insurance Program, will continue to complement these efforts by helping, whenever possible, to assure that there are needed facilities in these areas.

B. Growth in the Number of Older Adults

Although the State's population is relatively young, with only 1 in 10 Californians 65 or older, more seniors reside in California than in any other state. Between 2000 and 2020, the number of seniors living in California is expected to jump from 3.7 million to 6.6 million. (Reference #1) In four decades, the number of older adults may nearly triple, to over 10 million. Most of this growth is predicted to occur between 2010 and 2030, as baby boomers enter their retirement years. (Reference #3)

During these same four decades, the number of the "oldest old" (those age 85 and older) is likely to increase, perhaps as much as fourfold. This growth of the oldest old is likely to have great impact on health and support systems, since the frail elderly need more health and support services.

Historically, the elderly have been cared for in institutional settings, such as nursing homes. California has over 1400 nursing homes, 15 percent of which are not-for-profit. Over 100,000 Californians reside in skilled nursing facilities.

As California's population ages, the need for long-term care will expand. The pattern of long-term care will change as more options become available to address the desires of the State's older population to maintain their highest level of independence for as long as possible.

As the need for long-term care grows and the pattern of long-term care changes, there will be a need for additional skilled nursing facilities and more community based health centers. These are opportunities where the Loan Insurance Program could benefit the borrowing organization.

C. Hospital Implementation of Seismic Safety Requirements

The Alfred E. Alquist Hospital Facilities Seismic Safety Act of 1983 established a set of seismic safety standards for hospital construction. Senate Bill 1953 (**SB 1953**), signed into law on September 2, 1994, requires that all acute-care hospitals meet the minimum seismic standards established by this Act.

The legislation, for the first time, required existing hospital buildings to be retrofitted to meet seismic safety standards. All general acute care hospital buildings must meet minimum life safety requirements by 2008. Subsequently, by 2030 they must be in substantial compliance with the Seismic Safety Act.

Recently, legislation was passed that allows extensions to the 2008 date to be granted by the Office of Statewide Health Planning and Development. The maximum length of these extensions is five years to 2013.

The Program is a financial resource to assist hospitals in borrowing funds at lower cost interest rates to undertake construction or retrofit projects for compliance with seismic safety requirements.

D. Financial Solvency Challenges

Many healthcare facilities in California are confronting increasing financial pressures.

Over the past decade, payors have tried to maintain or reduce healthcare payments. The Federal government reduced Medicare reimbursement with the Balanced Budget Act of 1997. The Balanced Budget Refinement Act of 2000 provided partial relief from the previous significant payment reductions. The new Medicare Ambulatory Payment Classification (APC) system for hospital outpatient services is predicted to have an overall reimbursement reduction. (Reference #5) Health insurance plans and large purchasers have also been trying to restrain large increases in provider payments.

New pressures are affecting costs. The shortage of nurses (as well as other healthcare professionals) is creating inflationary pressure on staffing costs (wages, benefits, training costs, temporary coverage expenses, and retention / recruitment bonuses). Liability insurance cost increases are impacting many healthcare facilities. Drugs that provide more effective therapy are more expensive than those previously used. Healthcare providers are incurring additional costs to meet the new requirements of the Health Insurance Portability and Accountability Act (HIPAA).

The combination of payment constraints and increasing costs is generally compressing operating margins and putting pressure on financial liquidity.

These financial circumstances present ongoing challenges for OSHPD. Loan insurance can only be approved for financially feasible projects and thus “at no cost to the State.” OSHPD will need to continue to carefully evaluate future loan insurance applications and to diligently monitor existing insured borrowers.

E. Opportunities for Community Based Programs

Opportunities are evolving for new community-based residential healthcare services. New community non-profit organizations may be developed to provide services for the drug / alcohol treatment and developmentally disabled.

1. Programs for Alcohol and Drug Treatment

In November 2000, the Substance Abuse and Crime Prevention Act (**Act**) (Proposition 36) was passed. Under this Act, persons convicted of nonviolent drug possession are to be provided community based drug treatment and related services. The Act provides \$60 million in start-up costs and \$120 million annually in FYs 2001-2006 for expanded community based substance abuse services. The State's Department of Alcohol and Drug Programs (**ADP**) administers the Act. ADP estimates that 36,000 new clients per year may seek treatment under this program.

Opportunities for new residential facilities that would benefit from loan insurance may occur. Future applications will depend upon the pace of implementation of the Act, the amount of State funding, and the availability of community non-profit organizations.

2. Services for Developmentally Disabled

Approximately 167,000 children and adults are designated "developmentally disabled" by the State's Department of Developmental Services (**DDS**). These children and adults have conditions that include cerebral palsy, mental retardation, epilepsy, and autism. Most of the developmentally disabled - about 163,000 - live at home or in small privately run residential care facilities. These residential facilities and other community-based programs for the disabled are overseen by 21 private non-profit agencies, called regional centers. The rest of the state's developmentally disabled population - about 3,800 people - lives in five state-run developmental centers. (Reference #4)

A DDS goal is to increase the amount of licensed residential options available to individuals with developmental disabilities. OSHPD and DDS are exploring opportunities for OSHPD to provide loan insurance to non-profit organizations that develop new residential facilities.

F. Strong Governance and Good Management are Still Critical for Success

Management and governance remain the essential component for successful healthcare facilities.

A strong governing board provides strategic direction and general support for the healthcare facility's initiatives in meeting its mission. In addition to their fiduciary responsibility of reviewing financial performance and prudently managing the facility's assets, governing boards must be reviewing market conditions of healthcare services, professional staff, physicians, and insurance

plans in an organized way. Governing boards also are key in identifying new ways to raise capital and frequently are the cornerstone of successful fund raising efforts.

Good management has an ability to chart a clearly defined course and lead the organization. With numerous financial pressures (changing reimbursement, cost increases, health manpower shortages, new medical technology, and new information technology), management must be prepared to develop new strategies.

Healthcare leadership must be creative, pro-active, flexible, and disciplined to adapt to the quickly changing healthcare marketplace. Together, the governing board and management both need to demonstrate a willingness to make tough decisions.

The evaluation of an applicant for loan insurance involves, in general terms, three areas of assessment: capacity, collateral, and character. Financial capacity (ability to repay) and financial collateral have established objective measures for assessing an applicant and the proposed project. Character (strong governance and good management) is intangible and requires subjective evaluation. While past successes are usually a good indicator, with the constantly changing healthcare environment, it is important that an assessment of character is also done during the application review. The Project Officer, Cal-Mortgage Division Management, and the Advisory Loan Insurance Committee assess the borrower for governing board strength and management depth and skill.

Conclusion

Healthcare remains dynamic and challenging. The demand for healthcare services continues to grow. Health facilities and the roles they play in the healthcare delivery system are continually evolving.

OSHDP must monitor the changing business environment in which applicants operate in order to prudently approve insurance for those borrowers who provide needed healthcare services and can remain viable and competitive in this dynamic and challenging environment.

In an era with increasing demand for services coupled with payment constraints, increasing operating costs, and added building and technology requirements, the ability for healthcare facilities to access low cost capital remains an important component in OSHDP's vision of providing equitable healthcare accessibility for California.

Section IV. Overview of Changes in the Healthcare Loan Insurance and Debt Financing Industries

Since the 1995 State Plan, significant changes have occurred in healthcare bond financing and loan insurance that affect the Program. These changes will affect healthcare facilities, which borrow funds for construction or expansion.

In general, not-for-profit healthcare organizations' access to low cost capital has become more difficult, because:

- The number of loan insurers and banks issuing Letters-of-Credit have decreased.
- Interest rates on healthcare financings have increased.

The number of providers of bond insurance and Letters-of-Credit has decreased. MBIA Insurance Corporation (formerly known as Municipal Bond Investors Assurance), an AAA-rated insurer, has pulled away from weaker healthcare borrowers and appears to be insuring borrowers with an underlying credit rating of A- or better. American Capital Access Financial Guaranty Corporation (ACA), an A-rated insurer, suspended writing new bond insurance in California. Many banks that issue Letters-of-Credit have left the healthcare market completely, while others are only making proposals for borrowers within their primary market. (Reference #2)

Interest rates on healthcare financings have increased relative to other sectors because of problems in the general economy and because of a number of highly publicized defaults in the non-profit healthcare sector.

In July 1998, the Allegheny Health and Education Research Foundation (AHERF), in Pennsylvania, filed bankruptcy. Defaults have, also, occurred in the long-term care sector with bankruptcy filings by four of the six largest investor-owned nursing home companies.

Interest rates for healthcare bonds have increased relative to non-healthcare bonds. In 1998, there was virtually no difference. According to Cain Brothers, an investment banker, at the beginning of 1999, a premium was being paid for typical healthcare bonds over the bond index. Bond interest rates are stated using the term "basis points." A basis point is equal to .01%. In 1999, the difference in healthcare bonds over the bond index (non-healthcare bonds) was 5-10 basis points (.05% - .10%). By the end of 1999, according to Cain Brothers, the spread had become 75 basis points (.75%). In 2000, the spread reached 130 basis points (1.30%). (Reference #2)

The premium in interest rates reflects the general perception that healthcare bonds have a higher probability of default and are a greater risk as compared to non-healthcare bonds. For all healthcare borrowers, the on-going cost of financing (interest payments) is greater. With greater costs, the ability to pay is

more challenging; and thus, the access to funds is more difficult. Anecdotally, it has been said that the interest rate premium for healthcare bonds has declined, but still remains higher than the bond index.

In a period with fewer loan insurance companies in California and increasing interest rates, the ability for non-profit healthcare providers to access lower cost capital through the California Health Facility Construction Loan Insurance Program remains an important component in OSHPD's vision of providing equitable healthcare accessibility for California.

Section V. GUIDING PRINCIPLES

OSHPD has current authority to insure \$2 billion in additional loans.

In order to focus the Program on the needs of California's healthcare system, it is administered according to guiding principles. These principles enable potential applicants to assess the consistency of their project goals with current Program policy. They also provide a frame of reference for Cal-Mortgage staff to use in determining which applications to recommend for review by the Advisory Loan Insurance Committee and for approval by the Director of OSHPD.

The guiding principles are intended to be non-regulatory and flexible, except where specifically required by statute.

A. Guiding Principles

- **Equitable Accessibility to Care.** The primary purpose of the Program is to assist in ensuring that needed healthcare facilities are available to provide equitable accessibility to healthcare for California. The Program should be available to assist needed facilities to obtain financing, especially where financing alternatives are limited or non-existent. OSHPD believes this is an issue for projects in medically underserved areas, and for non-profit or government providers who serve a disproportionate share of publicly sponsored or indigent patients.
- **Financial Feasibility.** The Program is required by Health & Safety Code Section 129005 to operate "without cost to the State." All projects must be able to service all debt, including their insured loan. When projects depend heavily on government programs for reimbursement, applicants should have strong support from the appropriate principal federal, state or local agencies that administer programs supporting services provided by the applicant.
- **Community Need.** Applicants must provide a description of the community needs that the facility will meet and data to substantiate the stated needs. OSHPD staff evaluate feasibility information to determine if the facility is needed by the community to provide the specified services. Where there is significant competition among multiple providers for the same patient population, such competition can be an indicator that there is adequate service capacity available to the patient population.
- **Actuarial Stability.** OSHPD encourages applications from borrowers that have sufficient credit quality and applications for projects that, if approved, would improve the Program's actuarial stability.

- **Diversification of Portfolio.** OSHPD recognizes the need to provide for a reasonable balance among all types of healthcare facilities. It is also important to maintain geographic diversity with all regions of the State included in the portfolio.
- **Access to Capital.** OSHPD recognizes the particular problems faced by very small projects (generally those requiring less than \$5 million) and will work pro-actively with small applicants, the financial community, and other State agencies to help meet their needs for capital.
- **Adequate Collateral Security.** Applicants must provide collateral security to cover the insured loan. Projects insured by OSHPD must be built on land owned by the applicant.
- **Obligation to Provide Community Service.** Under existing law, Cal-Mortgage insured projects have a community service obligation. To be eligible for insurance, applicants are required to offer reasonable assurance that the services of the healthcare facility will be available to all persons residing or employed in the area served by the facility.
- **Program Exposure.** The Program should be managed and loan applications should be approved within the context that no one individual project should be so large that it makes the Program actuarially unsound and potentially jeopardizes the Program's ability to operate without State funds.

B. Expectations of Applicants and Borrowers

An applicant is expected to make an equity contribution to the project. The applicant's equity should be from operating surpluses or donations. The contributed equity should be in any combination of real property, personal property, or cash.

If an applicant owes debt to a related corporation, the related corporation will be expected to agree that, in the event the borrower defaults in its loan payments insured by OSHPD, the debt to the related corporation will be forgiven.

Each applicant must certify that board members, officers, employees, or their families will not receive an excessive benefit from the financing. This expectation will be subject to the applicable State of California conflict of interest rules.

The healthcare facility is expected to be owned and operated by an existing non-profit organization. A situation where an existing healthcare facility is

being sold by a for-profit corporation to a nonprofit organization is generally inconsistent with program eligibility.

The construction phase of the project is expected to be scheduled to begin within an appropriate period from the close of the insured loan transaction.

A borrower's activities are expected to be complementary to the program policies of State, Federal, and local governmental agencies.

A borrower is expected to comply with the laws and regulations of the State, Federal, and local governments.

Section VI. Goals and Objectives: 2001 - 2003

A. Proposals to Ensure the Program Effectively Addresses the Healthcare Needs of Californians

1. Identify priority needs

In previous State Plans, OSHPD had identified priority needs to provide a framework for staff and the Advisory Loan Insurance Committee in reviewing new applications. For purposes of this State Plan, OSHPD has determined that the following types of projects are deemed to have high priority and will be encouraged (for profile of potential applications, see **Exhibit 6**):

- Projects in medically underserved areas or projects that serve medically underserved populations.
- Projects that involve compliance with seismic safety standards.
- Projects that enhance the actuarial stability of the Program. Projects that are especially strong financially and are able to obtain an independent credit rating.
- Projects that provide services to keep people with special needs functioning optimally in a community-based environment and avoiding the need for institutional placement. Special needs populations would include, but not be limited to, the elderly, children, persons with mental or developmental disabilities, and persons in substance abuse therapy.
- Projects that promote access to primary care services.
- Projects that provide innovative solutions to healthcare delivery problems. These may include projects that promote the development of healthcare networks in rural areas, projects that provide integrated services for persons with chronic health conditions, or projects that develop continuums of service.
- Projects that make use of new technologies to improve access to needed care or improve the quality of care.
- Projects that reduce risk to the Program's Insurance Fund. This would include projects to refinance debt already insured by OSHPD to substantially reduce interest rates and projects to merge facilities already insured by the Program in order to realize economies of scale or other operating efficiencies.

2. Collaborate with healthcare associations.

OSHPD's Cal-Mortgage staff will continue to work in collaboration with various healthcare associations to identify problems and evaluate options for healthcare facility financing throughout California.

3. Work closely with investment bankers and financial consultants.

OSHPD's Cal-Mortgage staff will increase its efforts to work closely with investment bankers and financial consultants in order to have Program requirements responsive to potential borrowers' needs while maintaining appropriate security for the repayment of the loans.

Since the 1995 State Plan, OSHPD focused the Program to those projects that did not have other financing options. The current belief is that the Program can more effectively address the needs of all Californians if the Program insures loans to a greater diversity of credit ratings.

There are new opportunities to implement programmatic changes that are responsive to a wider range of healthcare facilities. OSHPD staff will reconfirm its partnership relationship with borrowers and potential applicants. Revisions in the insurance premium structure, proposed revisions of covenants, and the introduction of variable rate bond financing arrangements are under development.

Our goal is two-fold: to expand the availability of the Program to financially "stronger" borrowers, while remaining the primary loan insurer for critical access healthcare facilities.

4. Conduct contracting process for HUD 242 feasibility studies.

By statute, for-profit healthcare organizations are not eligible for the Program. The Federal government has a hospital loan insurance program (referred to as HUD 242) for which both for-profit and not-for-profit hospitals are eligible. OSHPD staff is working with HUD staff to implement a contracting process for financial feasibility studies for hospitals applying to HUD for loan insurance.

B. Proposals to Reduce Program Risk

1. Increase diversity in the Portfolio's range of borrowers' credit ratings.

Presently, the portfolio consists substantially of non-investment grade credit rated borrowers. Overall, increasing the proportion of investment grade borrowers would reduce Program risk, as the risk of default is estimated to be lower for investment grade credit rated organizations.

- To facilitate this goal, tiered discounts to the one-time, up-front insurance premium were implemented.
- OSHPD intends to examine the usefulness of creating covenant flexibility within the legal documents to recognize the differences between borrowers' financial strength.
- OSHPD also intends to consider the appropriate use of variable rate debt in conjunction with fixed rate debt.

The goal of revising the loan insurance premium schedule, the loan covenants, and the debt financing options is to create a better balance of borrower credit risk within the Portfolio and thus reduce the overall insurance risk in the Program.

2. Develop policy recommendations for lines-of-credit

The ALIC suggested and Cal-Mortgage staff will initiate the development of procedures that require a borrower to identify, at the time funds are utilized from a working capital line-of-credit, (1) the time period for repayment and (2) the anticipated source(s) of repayment.

Section VII. PUBLIC COMMENT

The Office of Statewide Health Planning and Development invited public comment on the Draft 2001 State Plan.

First, OSHPD solicited oral input via two public meetings:

- The Advisory Loan Insurance Committee met on January 10, 2002 and reviewed the Draft 2001 State Plan. Several suggestions to clarify text were offered. These were included as revisions in the Draft 2001 State Plan before it was distributed for comment to borrowers and other interested parties.
- The California Health Policy and Data Advisory Commission met on February 25, 2002. The Draft 2001 State Plan was presented, reviewed, and discussed.

OSHPD is pleased with the support it received on the 2001 State Plan from the Advisory Loan Insurance Committee and California Health Policy and Data Advisory Commission.

Second, OSHPD requested written input from February 4, 2002, through March 29, 2002. Written notices (**Exhibit 22**) of the Draft 2001 State Plan were sent to 154 insured borrowers. Copies of the Draft 2001 State Plan were sent to those 46 borrowers who requested a copy. Additionally, written notices (**Exhibit 23**) with copies of the Draft 2001 State Plan were sent to 68 interested persons.

As of the date for finalizing the State Plan, no comments (letters, e-mails, telephone calls) had been received.

Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division

2001 State Plan

References List

- #1 CAHSA (California Association of Homes and Services for the Aging), *Industry Facts Continuum of Care for the Elderly 2001*, page 2.
- #2 Hayman, Amy, "Dealing with an Unfavorable Credit Quality Curve", *Hospitals to Housing – The Long-Term Continuum of Care for the Elderly*, Issue 3, May 19, 2000, page 3, Cain Brothers Bimonthly Newsletter.
- #3 Lee, Ronald and Valentine Villa, "Population Aging in California", *CPRC Brief - Strategic Planning on Aging*, No. 2, May 2001, page 1 – 2, (California Policy Research Center).
- #4 Wiegard, Steve, " A system divided: Inequities in treatment of disabled have put families at odds. The state seeks a solution.", *Sacramento Bee*, February 25, 2001.
- #5 "199 Median Ratios for Non-profit Hospitals and Health Care Systems", *Fitch IBCA, Duff + Phelps Healthcare Special Report*, August 4, 2000.

Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division

2001 State Plan

List of Exhibits

1. Health and Safety Code Citation - Section 129020
2. Summary Table of the Program's Financial Status and Activity Report
3. Summary Table of Payouts from Insurance Fund for Defaulted Projects
4. Listing of Insured Projects
5. Table of Projects Insured since 1995 State Plan
6. Summary Table of Number of Potential Projects, by Facility Type
7. Summary Table of Number of Projects and Insured Risk, by Facility Type
8. Listing of Insured Projects, sorted by Facility Type
9. Summary Table of Projects by County
10. Listing of Insured Projects, sorted by County
11. Listing of Insured Projects, sorted by Size of Insured Loan Amount
12. Graph of Portfolio / Insured Risk
13. Graph of Number of Insured Loans
14. Graph of Cash Balance of Insurance Fund
15. Pie Chart Graphs of Facility Types of Projects, by Number
16. Pie Chart Graphs of Facility Types of Projects, by Insured Loan Amount
17. Pie Chart Graphs of Insured Projects, by Size of Insured Loan Amount
18. California Map of Primary Care Health Professional Shortage Areas
19. California Map of Mental Health Professional Shortage Areas
20. California Map of Dental Health Professional Shortage Areas
21. California Map of Medically Underserved Areas (MUA)
and Medically Underserved Populations
22. Copy of Letter to Insured Borrowers Regarding the Draft 2001 State Plan
23. Copy of General Notice Letter Regarding the Draft 2001 State Plan

Health and Safety Code Citation Section 129020

Requirement for State Plan

129020. The office shall implement the loan insurance program for the construction, improvement, and expansion of public and nonprofit corporation health facilities so that, in conjunction with all other existing facilities, the necessary physical facilities for furnishing adequate health facility services will be available to all the people of the state.

Every odd-numbered year the office shall develop a state plan for use under this chapter. The plan shall include an overview of the changes in the health care industry, an overview of the financial status of the fund and the loan insurance program implemented by the office, a statement of the guiding principles of the loan insurance program, an evaluation of the program's success in meeting its mission as outlined in Section 129005, a discussion of administrative, procedural, or statutory changes that may be needed to improve management of program risks or to ensure the program effectively addresses the health needs of Californians, and the priority needs to be addressed by the loan insurance program.

The health facility construction loan insurance program shall provide for health facility distribution throughout the state in a manner that will make all types of health facility services reasonably accessible to all persons in the state according to the state plan.

Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division

**California Health Facility Construction
Loan Insurance Program**

**Summary
Financial Status and Activity Report**

<u>Activity</u>	<u>June 30, 1999</u>	<u>June 30, 2000</u>	<u>June 30, 2001</u>
Number of Insured Projects	182	173	182
<u>Insured Portfolio</u>			
Total Amount of Insured Loans	\$1,197,900,144	\$968,776,923	\$1,039,985,137
<u>Financial Status of Health Facility Construction Loan Insurance Program</u>			
HFCLIF cash balance	\$159,456,957	\$152,519,901	\$151,922,050
Obligations to Cal-Mortgage After Default - Payments to HFCLIF	67,077,239 ⁽¹⁾	83,448,150	\$80,185,622
Direct Obligations of Cal-Mortgage - Payments from HFCLIF	- 181,505,814 ⁽¹⁾	- 187,280,000	\$171,900,000
Current Value of Loan Insurance Program	<u>\$ 45,028,382</u>	<u>\$ 48,688,051</u>	<u>\$60,207,672</u>

Footnotes:

- Source: (unless otherwise cited) Cal-Mortgage Monthly Reports June 30, 1999, June 30, 2000, and June 30, 2001
- (1) Source: OSHPD Accounting Staff

Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division

**Summary of Payouts from
Health Facility Construction Loan Insurance Fund
For Defaulted Projects**

Total Paid (or received) by Calendar Year

Prior to	1992	\$0
	1992	\$4,584,603
	1993	\$0
	1994	\$409,000
	1995	\$4,936,940
	1996	\$15,420,236
	1997	\$23,285,174
	1998	\$13,096,583
	1999	(13,181,372) *
	2000	\$10,436,665
	2001	\$8,314,322

Total	\$58,987,829
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* Reimbursements to the Insurance Fund were greater than payments from the Insurance Fund

Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division

Listing of Insured Projects

(sorted by Borrower Name)
as of June 30, 2001

Borrower Name	Borrower City	Facility Type	Date Loan Insured	Original Insured Amount	Current Principal Balance
A R C - San Diego	San Diego	ICF-DD	7/23/1997	\$9,260,000	\$8,460,000
Achieve	Palo Alto	GH-DD/MD	7/8/1991	\$385,000	\$340,000
Advent Group Ministries, Inc	San Jose	GH-MD	2/28/1991	\$1,025,000	\$895,000
Aids Healthcare Foundation	Los Angeles	HOSPICE	5/17/2001	\$2,000,000	\$975,000
Aids Healthcare Foundation	Los Angeles	HOSPICE	10/22/1992	\$5,855,000	\$4,770,000
Aids Healthcare Foundation	Los Angeles	HOSPICE	11/10/1994	\$3,300,000	\$3,040,000
Airport Marina Counseling Services	Westchester	CLINIC-MH	9/27/1995	\$735,000	\$645,000
Aldea Inc.	Napa	GH-MD	6/27/1990	\$495,000	\$430,000
Aldersly, Inc.	San Rafael	MULTI-CCRC	5/29/1991	\$2,000,000	\$1,735,000
Alliance For Community Care	San Jose	GH-MD	10/8/1992	\$7,500,000	\$6,625,000
Alliance For Community Care	San Jose	CLINIC-MH	12/23/1992	\$2,600,000	\$2,335,000
Altamed Health Services	Commerce	CLINIC-PC	4/28/2000	\$5,250,000	\$5,250,000
Apple Valley Christian Centers	Apple Valley	SNF	5/24/2001	\$9,525,000	\$9,525,000
Ararat Home Of Los Angeles	Mission Hills	MULTI-OTH	4/29/1998	\$6,460,000	\$5,955,000
Asian Americans For Community Involvement For Santa Clara	San Jose	CLINIC-MH	10/28/1992	\$4,800,000	\$4,300,000
Asian Community Skilled Nursing Facility	Sacramento	SNF	10/14/1992	\$3,160,000	\$2,480,000
Asian Health Services	Oakland	CLINIC-PC	11/21/1995	\$6,500,000	\$5,885,000
Atascadero Committee For Education	Atascadero	ADC-DD	9/4/1991	\$190,000	\$140,000
Atherton Baptist Homes	Alhambra	MULTI-CCRC	2/5/1987	\$11,470,000	\$8,530,000
Beacon House	San Pedro	CDRF	12/8/1993	\$2,280,000	\$2,045,000
Becoming Independent	Santa Rosa	ADC-DD	2/29/1996	\$1,665,000	\$1,475,000
Behavioral Health Services	Gardena	CDRF	11/7/1996	\$10,845,000	\$9,825,000
Bi - Bett Corporation	Concord	CDRF	3/28/1991	\$1,400,000	\$600,000
Big Valley Medical Center	Bieber	CLINIC-PC	3/24/1993	\$900,000	\$711,655
Blood Centers Of The Pacific	San Francisco	BB	12/17/1991	\$8,500,000	\$7,405,000
Burt Center, Inc.	San Francisco	GH-MD	4/18/2001	\$3,200,000	\$3,200,000
Butte Valley - Tulelake Rural Health Projects Inc.	Dorris	CLINIC-PC	10/28/1992	\$1,000,000	\$895,000
California Autism Foundation Inc.	Richmond	GH-DD/MD	11/8/1995	\$4,700,000	\$4,195,000
California Odd Fellows Housing Of Napa, Inc.	Napa	MULTI-OTH	10/6/1993	\$18,995,000	\$17,515,000
Canyon Acres Children'S Services	Anaheim	GH-DD/MD	8/21/1991	\$975,000	\$845,000
Casa De Las Campanas	San Diego	MULTI-CCRC	6/9/1998	\$45,340,000	\$42,585,000

Borrower Name	Borrower City	Facility Type	Date Loan Insured	Original Insured Amount	Current Principal Balance
Catholic Healthcare West	San Francisco	MULTI-OTH	3/17/1993	\$9,360,000	\$7,540,000
Center For Aids Research, Education & Services	Sacramento	CLINIC-AIDS	4/30/1998	\$3,330,000	\$3,070,000
Central Coast Neurobehavior Center, Inc.	Morro Bay	ADC-DD	8/17/1989	\$410,000	\$340,000
Central Valley Indian Health, Inc.	Clovis	CLINIC-PC	4/28/2000	\$1,055,000	\$1,055,000
Childnet Youth And Family Services, Inc.	Long Beach	GH-MD	4/12/1993	\$1,200,000	\$1,070,000
Children'S Institute International.	Los Angeles	GH-MD	2/27/1992	\$5,635,000	\$5,015,000
Clare Foundation	Santa Monica	CDRF	8/22/1991	\$1,930,000	\$1,715,000
Clinica De Salud Del Valle De Salinas	Salinas	CLINIC-PC	7/26/1989	\$580,000	\$485,000
Clinicas De Salud Del Pueblo	Brawley	CLINIC-PC	7/2/1992	\$1,720,000	\$1,545,000
Clinicas De Salud Del Pueblo	Brawley	CLINIC-PC	6/26/1998	\$3,250,000	\$3,095,000
Clinicas De Salud Del Valle De Salinas	Salinas	CLINIC-PC	7/2/1992	\$1,450,000	\$1,305,000
Clinicas Del Camino Real, Incorporated	Ventura	CLINIC-PC	3/13/1990	\$2,800,000	\$2,390,000
Clinicas Del Camino Real, Incorporated	Ventura	CLINIC-PC	5/24/1995	\$7,225,000	\$6,690,000
Clinicas Del Camino Real, Incorporated	Ventura	CLINIC-PC	11/15/1993	\$550,000	\$495,000
Community Church Retirement Center	Mill Valley	MULTI-OTH	3/11/1997	\$6,115,000	\$5,595,000
Community Health Centers Of The Central Coast, Inc.	Nipomo	CLINIC-PC	7/17/1990	\$770,000	\$655,000
Community Health System, Inc.	Bloomington	CLINIC-PC	8/30/2000	\$1,295,000	\$1,295,000
Community Medical Center, Inc.	Stockton	CLINIC-PC	10/12/1994	\$3,050,000	\$2,850,000
Corcoran District Hospital	Corcoran	HOSP-DIST	7/23/1992	\$1,555,000	\$1,180,000
Del Norte Clinics, Inc.	Yuba City	CLINIC-PC	4/28/2000	\$1,105,000	\$1,105,000
Del Norte Clinics, Inc.	Yuba City	CLINIC-PC	5/28/1993	\$1,285,000	\$1,145,000
Desarrollo Familiar	Richmond	CLINIC-MH	12/23/1986	\$150,000	\$115,000
Desert Aids Project, Inc.	Palm Springs	CLINIC-AIDS	4/26/2001	\$3,570,000	\$3,570,000
Drug Abuse Alternatives Center	Santa Rosa	CDRF	11/18/1993	\$1,825,000	\$1,655,000
Eastfield Ming Quong	Campbell	GH-MD	3/11/1997	\$7,025,000	\$6,280,000
Eastfield Ming Quong	Campbell	CLINIC-MH	10/2/1992	\$1,040,000	\$935,000
Eden Hospital Health Services Corp.	Castro Valley	MULTI-OTH	7/29/1993	\$23,675,000	\$19,855,000
El Centro Regional Medical Center	El Centro	HOSP	4/26/2001	\$39,300,000	\$39,300,000
El Proyecto Del Barrio	Arleta	CLINIC-PC	12/16/1997	\$4,575,000	\$4,370,000
El Proyecto Del Barrio	Arleta	CLINIC-PC	12/4/1990	\$2,040,000	\$1,735,000
Exceptional Children'S Foundation	Los Angeles	GH-DD/MD	9/27/1995	\$2,990,000	\$2,610,000
Families First, Inc.	Davis	GH-DD/MD	3/15/2000	\$17,600,000	\$17,600,000
Feedback Foundation, Inc.	Anaheim	ADHC	12/30/1992	\$2,140,000	\$1,899,320
Fellowship Homes, Inc.	Modesto	MULTI-OTH	8/27/1996	\$6,065,000	\$5,475,000
Friends Association Of Services For The Elderly	Santa Rosa	MULTI-OTH	10/14/1992	\$1,140,000	\$470,000
Friends Association Of Services For The Elderly	Santa Rosa	MULTI-OTH	8/12/1993	\$2,000,000	\$1,830,000
Gardner Family Health Network	San Jose	CLINIC-PC	7/26/1989	\$1,670,000	\$605,000

Borrower Name	Borrower City	Facility Type	Date Loan Insured	Original Insured Amount	Current Principal Balance
Gardner Family Health Network	San Jose	CLINIC-PC	8/30/1995	\$5,000,000	\$4,400,000
Gateway Center	Pacific Grove	GH-DD	5/11/1993	\$850,000	\$755,000
Golden Valley Health Centers	Merced	CLINIC-PC	1/28/1994	\$3,785,000	\$3,420,000
Golden Valley Health Centers	Merced	CLINIC-PC	10/30/1990	\$445,000	\$390,000
Guadalupe Homes - Colton	Colton	GH-MD	12/26/1991	\$2,425,000	\$2,065,000
Guadalupe Homes - Colton	Colton	GH-MD	4/4/1994	\$1,380,000	\$785,000
Henrietta Weill Memorial	Bakersfield	CLINIC-MH	10/14/1992	\$1,445,000	\$1,075,000
Henry Mayo Newhall Memorial Hospital	Valencia	HOSP	2/21/2001	\$54,895,000	\$54,895,000
Henry Ohlhoff House	San Francisco	CDRF	9/14/1990	\$1,000,000	\$860,000
Home For Jewish Parents	Danville	MULTI-OTH	7/9/1997	\$12,555,000	\$11,940,000
Home Of The Guiding Hands Corporation	Lakeside	GH-DD/MD	8/2/1991	\$2,830,000	\$2,445,000
Hope Rehabilitation Service	Santa Clara	ADC-DD	11/20/1990	\$6,500,000	\$5,550,000
Horizon Services	Hayward	CDRF	9/28/1992	\$1,140,000	\$1,025,000
Humboldt Open Door Clinic	Arcata	CLINIC-PC	4/28/2000	\$1,195,000	\$1,195,000
Innovative Health Care Services	Chico	ADHC	12/18/1990	\$540,000	\$435,000
Interim, Inc.	Monterey	GH-MD	6/24/1991	\$750,000	\$650,000
Isla Vista Community Clinic	Isla Vista	CLINIC-PC	7/7/1988	\$450,000	\$365,000
Janus Of Santa Cruz	Santa Cruz	CDRF	3/24/1993	\$1,000,000	\$870,000
Jeffrey Foundation	Los Angeles	CDRF	12/18/1992	\$305,000	\$265,000
John C. Fremont Hospital District	Mariposa	HOSP-DIST	10/11/1994	\$5,840,000	\$5,435,000
Keiro Nursing Home	Los Angeles	SNF	3/10/1994	\$10,675,000	\$8,995,000
Kern Valley Healthcare District	Mountain Mesa	HOSP-DIST	2/15/1991	\$20,590,000	\$17,770,000
Kern Valley Healthcare District	Mountain Mesa	HOSP-DIST	6/23/2000	\$2,000,000	\$1,130,991
Lifelong Medical Care, Incorporated	Berkeley	CLINIC-PC	12/14/1998	\$2,970,000	\$2,970,000
Lincoln Child Center, Inc.	Oakland	GH-MD	11/23/1999	\$2,900,000	\$2,900,000
Lincoln Glen Manor For Senior Citizens	San Jose	MULTI-OTH	3/9/2000	\$7,500,000	\$7,500,000
Lodi Memorial Hospital Association, Inc.	Lodi	HOSP	10/26/2000	\$12,570,000	\$12,570,000
Lompoc District Hospital	Lompoc	HOSP-DIST	9/23/1998	\$6,375,000	\$5,955,000
Los Angeles Centers For Alcohol & Drug Abuse	Santa Fe Springs	CDRF	1/29/1997	\$1,515,000	\$1,405,000
Lytton Gardens, Inc.	Palo Alto	SNF	12/9/1999	\$16,355,000	\$16,345,000
Madera Community Hospital	Madera	HOSP	3/11/1993	\$10,200,000	\$6,280,000
Marshall Hospital	Placerville	HOSP	10/6/1993	\$19,975,000	\$15,230,000
Marshall Hospital	Placerville	HOSP	5/13/1998	\$28,030,000	\$26,415,000
Mayers Memorial Hospital District	Fall River Mills	HOSP-DIST	1/27/1994	\$9,220,000	\$7,465,000
Mendocino Coast Health Care District	Fort Bragg	HOSP-DIST	8/28/1996	\$4,030,000	\$3,585,000
Mental Health Systems Inc.	San Diego	GH-MD	12/30/1992	\$650,000	\$575,000
Mexican American Community Service Agency	San Jose	ADHC	9/26/1989	\$1,480,000	\$1,250,000

Borrower Name	Borrower City	Facility Type	Date Loan Insured	Original Insured Amount	Current Principal Balance
Midvalley Recovery Services	El Monte	CDRF	1/25/1991	\$1,175,000	\$1,015,000
Milestones Human Services, Inc.	San Francisco	CDRF	7/17/1997	\$2,795,000	\$2,665,000
Modoc County Medical Center	Alturas	HOSP	6/28/1990	\$2,515,000	\$1,525,000
Montecito Retirement Association	Montecito	MULTI-CCRC	7/13/1993	\$19,430,000	\$15,830,000
National Council On Alcoh. & Drug Depend. Of The South Bay	Torrance	CDRF	3/24/1993	\$1,290,000	\$1,130,000
North County Health Services Inc.	San Marcos	CLINIC-PC	3/14/1996	\$5,500,000	\$5,015,000
Northcountry Clinic	Arcata	CLINIC-PC	7/7/1988	\$585,000	\$475,000
Odd Fellows Home Of California	Saratoga	MULTI-OTH	10/14/1999	\$34,500,000	\$34,500,000
Olive Crest Treatment Center.	Santa Ana	GH-MD	12/30/1992	\$2,280,000	\$2,025,562
Onlok Inc.	San Francisco	MULTI-OTH	12/22/1992	\$13,300,000	\$12,140,000
Orange County A R C	Anaheim	ADC-DD	11/17/1999	\$4,500,000	\$4,415,000
Oroville Hospital	Oroville	HOSP	10/15/1997	\$27,670,000	\$25,775,000
Oroville Hospital	Oroville	HOSP	11/8/2000	\$2,500,000	\$1,655,135
Pacific Clinics	Arcadia	CLINIC-MH	6/2/1988	\$5,455,000	\$4,540,000
Principles Inc.	Pasadena	CDRF	8/22/1991	\$2,245,000	\$1,995,000
Prototypes	Culver City	CDRF	6/27/2001	\$4,195,000	\$4,195,000
Prototypes	Culver City	CDRF	6/23/1993	\$2,530,000	\$1,950,000
Redlands Community Hospital	Redlands	HOSP	3/17/1987	\$37,620,000	\$7,470,000
Redlands Community Hospital	Redlands	HOSP	7/26/1990	\$3,997,148	\$2,867,148
Redwood Senior Homes & Services	Glendale	MULTI-CCRC	7/16/1991	\$15,200,000	\$12,000,000
Redwood Senior Homes & Services	Glendale	MULTI-OTH	7/8/1997	\$6,120,000	\$5,715,000
Redwoods Rural Health Center, Inc.	Redway	CLINIC-PC	5/19/1999	\$200,000	\$197,812
Redwoods Rural Health Center, Inc.	Redway	CLINIC-PC	3/13/1990	\$1,250,000	\$1,065,000
Retirement Housing Foundation, Inc.	Long Beach	MULTI-OTH	12/28/2000	\$19,375,000	\$19,375,000
Sacramento Medical Foundation	Sacramento	BB	5/6/1998	\$14,460,000	\$13,310,000
Salud Para La Gente	Watsonville	CLINIC-PC	4/28/2000	\$2,285,000	\$2,285,000
San Benito Health Foundation	Hollister	CLINIC-PC	11/28/1990	\$2,485,000	\$2,170,000
San Diego Christian Foundation	San Diego	MULTI-OTH	8/4/1992	\$8,360,000	\$7,515,000
San Fernando Valley Community Mental Health Center	Van Nuys	ADHC	6/26/1998	\$3,700,000	\$3,455,000
Sanctuary Psychiatric Centers Of Santa Barbara	Santa Barbara	GH-MD	1/16/1991	\$810,000	\$705,000
Sansum Santa Barbara Medical Foundation Clinic	Goleta	CLINIC-PC	8/8/1989	\$15,000,000	\$12,570,000
Scott Street Senior Housing Complex, Inc.	San Francisco	MULTI-OTH	6/18/1998	\$37,770,000	\$37,770,000
Seneca Residential And Day Treatment Center	San Leandro	GH-MD	7/13/1990	\$320,000	\$170,000
Sequoia Community Health Foundation	Fresno	CLINIC-PC	11/18/1993	\$2,430,000	\$2,205,000
Sequoia Community Health Foundation	Fresno	CLINIC-PC	4/28/2000	\$1,905,000	\$1,905,000
Sherman Oaks Health System	Sherman Oaks	HOSP	12/17/1999	\$2,000,000	\$1,900,000
Sierra View Homes	Reedley	MULTI-OTH	12/18/1996	\$4,425,000	\$3,995,000

Borrower Name	Borrower City	Facility Type	Date Loan Insured	Original Insured Amount	Current Principal Balance
Social Model Recovery Systems, Inc.	Covina	CDRF	6/27/2001	\$1,890,000	\$1,890,000
Social Model Recovery Systems, Inc.	Covina	CDRF	3/19/1993	\$935,000	\$835,000
Social Science Services, Inc.	Bloomington	CDRF	4/28/2000	\$1,970,000	\$1,970,000
Solheim Lutheran Home	Los Angeles	MULTI-CCRC	6/23/1994	\$8,230,000	\$6,975,000
Solvang Lutheran Home	Solvang	MULTI-CCRC	8/27/1996	\$5,210,000	\$4,590,000
Sonoma Valley Hospital District	Sonoma	HOSP-DIST	2/11/1987	\$8,940,000	\$6,630,000
Sonoma Valley Hospital District	Sonoma	HOSP-DIST	12/13/1984	\$12,445,000	\$2,605,000
Southern Calif. Development Corp. Of V O A, Inc.	La Mesa	GH-DD/MD	1/12/1996	\$3,500,000	\$3,010,000
Southern California Alcohol & Drug Program	Downey	CDRF	12/18/1997	\$4,095,000	\$3,840,000
Southern California Alcohol & Drug Program	Downey	CDRF	12/30/1992	\$1,315,000	\$1,168,242
Southern California Alcohol & Drug Program	Downey	CDRF	6/11/1993	\$775,000	\$700,000
Southern California Alcohol And Drug Programs, Inc.	Downey	CDRF	5/30/2001	\$1,780,000	\$1,780,000
St. Luke Manor	Fortuna	SNF	12/10/1991	\$1,480,000	\$1,080,000
St. Luke'S Hospital - S. F.	San Francisco	HOSP	7/15/1997	\$9,815,000	\$8,600,000
St. Paul'S Episcopal Home, Inc.	San Diego	MULTI-OTH	9/13/1994	\$7,140,000	\$5,775,000
Sunny View Lutheran Home	Cupertino	MULTI-CCRC	9/17/1997	\$4,430,000	\$3,975,000
Sunny View Lutheran Home	Cupertino	MULTI-CCRC	2/25/1999	\$5,685,000	\$5,555,000
Sunset Haven	Ontario	MULTI-OTH	8/28/1997	\$6,320,000	\$5,875,000
Tarzana Treatment Center, Tarzana	Tarzana	CDRF	12/9/1998	\$1,950,000	\$1,870,000
The H. E. L. P. Group	Sherman Oaks	GH-DD/MD	5/22/1998	\$17,275,000	\$16,480,000
The H. E. L. P. Group	Sherman Oaks	GH-DD/MD	5/25/2000	\$17,620,000	\$17,620,000
Thessalonika Family Services	Temecula	GH-DD/MD	12/19/1995	\$1,360,000	\$1,145,000
True To Life Children'S Services	Sebastopol	GH-MD	9/17/1997	\$1,700,000	\$1,585,000
True To Life Children'S Services	Sebastopol	GH-DD/MD	10/17/2000	\$2,400,000	\$2,400,000
Tulare Local Healthcare District	Tulare	HOSP-DIST	12/4/1998	\$12,920,000	\$12,230,000
United Cerebral Palsy	Santa Ana	ADHC	9/17/1993	\$760,000	\$690,000
United Health Center Of The San Joaquin Valley, Inc.	Parlier	CLINIC-PC	4/28/2000	\$950,000	\$950,000
V C H S - Valley Memorial Hospital	Pleasanton	HOSP	7/7/1993	\$11,660,000	\$10,030,000
V C H S - Valleycare Hospital Corporation	Pleasanton	HOSP	5/6/1992	\$8,500,000	\$6,205,000
V C H S - Valleycare Hospital Corporation	Pleasanton	HOSP	7/22/1997	\$37,165,000	\$33,350,000
Valley Health Team, Inc.	San Joaquin	CLINIC-PC	3/13/1990	\$1,025,000	\$870,000
Verdugo Mental Health Center	Glendale	CLINIC-MH	12/16/1993	\$1,000,000	\$900,000
Victor Valley Community Hospital	Victorville	HOSP	5/26/2000	\$8,470,000	\$8,470,000
Victor Valley Community Hospital	Victorville	HOSP	10/28/1999	\$3,000,000	\$2,307,372
Walden House Inc.	San Francisco	CDRF	6/27/2000	\$3,000,000	\$2,975,000
Walden House, Inc.	San Francisco	CDRF	3/24/1992	\$8,800,000	\$7,705,000
Walker Senior Housing Corporation V I I - The Lodge	Chico	MULTI-OTH	3/1/1991	\$15,000,000	\$12,965,000

Borrower Name	Borrower City	Facility Type	Date Loan Insured	Original Insured Amount	Current Principal Balance
Walker Senior Housing Corporation V I I - The Lodge	Chico	MULTI-OTH	11/17/1993	\$5,270,000	\$4,795,000
West Contra Costa Healthcare District	Richmond	HOSP	1/24/1997	\$5,000,000	\$3,656,588
West Oakland Health Council, Inc.	Oakland	CLINIC-PC	10/24/1990	\$2,500,000	\$2,225,000
	Totals	182 Projects		\$1,181,607,148	\$1,036,479,826

Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division

Projects Insured Since the 1995 State Plan

(Not Including Projects that are Only Refinancings or Lines of Credit)

(as of June 30, 2001)

Facility Name	Type of Facility	Location of Facility	Date Loan Closed	Insured Loan Amount
Southern California Development Corporation of VOA	Group Home DD	El Centro	01/11/96	3,500,000
FACT Retirement Services (dba Vista Del Monte) (Corp)	Multilevel	Santa Barbara	01/24/96	16,805,000
Becoming Independent, Inc.	Adult Day Care	Santa Rosa	02/29/96	1,665,000
North County Health Project, Inc. (San Marcos Comm. Health Center)	Clinic-PC	San Marcos	03/14/96	5,500,000
Fiscal Year 1995-96		Subtotal	4	27,470,000
California Lutheran Homes (Corp) (dba Carlsbad by the Sea)	Multilevel	Carlsbad	11/20/96	37,255,000
Los Angeles Centers for Alcohol & Drug Abuse	CDRF	Santa Fe Springs	01/29/97	1,515,000
Fact Retirement Services (Corp) (Villa Gardens)	Multilevel	Pasadena	02/05/97	9,360,000
Fiscal Year 1996-97		Subtotal	3	48,130,000
Redwood Senior Housing (dba Redwood Town Court)	Multilevel	Escondido	07/08/97	6,120,000
Home for Jewish Parents, Inc. (Corp.)	Multilevel	Oakland	07/09/97	12,555,000
Milestones Human Services, Inc.	CDRF	San Francisco	07/17/97	2,795,000
True to Life Children's Services	Group Home - MD	Sebastopol	09/17/97	1,700,000
Oroville Hospital, Inc.	Hospital	Oroville	10/15/97	27,670,000
El Proyecto Del Barrio (Corp.)	Clinic	Canoga Park	35780	4,575,000
Southern California Drug and Alcohol Programs, Inc.- Angel Step	CDRF	Downey	35782	4,095,000
Center for AIDS Research, Educations & Services (CARES)	Clinic	Sacramento	35915	3,330,000
Sacramento Medical Foundation Blood Center, Inc.	Blood Bank	Sacramento	35921	14,460,000
Marshall Hospital	Hospital	Placerville	35928	28,030,000
The H.E.L.P. Group	Mental Health	Sherman Oaks	35937	17,275,000
Casa de Las Campanas (Corporation)	Multilevel	San Diego	35955	45,340,000
Scott Street Sr. Housing & Social Services Complex, Inc.	Multilevel	San Francisco	35964	37,700,000
Clinicas de Salud del Pueblo, Inc.	Clinic	Brawley	35972	3,250,000
San Fernando Valley Community Mental Health Center, Inc.	Adult Day Care	Van Nuys	35972	3,700,000
Fiscal Year 1997-98		Subtotal	15	212,595,000

Facility Name	Type of Facility	Location of Facility	Date Loan Closed	Insured Loan Amount
Tarzana Treatment Center, Inc. - Long Beach Facility	CDRF	Long Beach	12/09/98	1,950,000
Lifelong Medical Care, Inc. & Coalition for Elder's Independence	Clinic	Berkeley	36143	2,970,000
Sunny View Lutheran Home (Corporation)	Outpatient Mental Hlth	Sherman Oaks	36216	5,685,000
Fiscal Year 1998-99		Subtotal	3	10,605,000
Odd Fellows Home of California, Inc. (Corporation)	Multilevel	Saratoga	36447	34,500,000
Orange County ARC	Adult Day Care	Anaheim	11/17/99	4,500,000
Lincoln Child Center	GH-MD	Oakland	11/23/99	2,900,000
Lincoln Glen Manor for Senior Citizens, Inc.	Multilevel	San Jose	03/09/00	7,500,000
The H.E.L.P. Group	Mental Health Facility	Sherman Oaks	05/25/00	17,620,000
Fiscal Year 1999-2000		Subtotal	5	67,020,000
Community Health Systems, Inc.	Primary Care Clinic	Bloomington	08/30/00	1,295,000
True to Life Children's Services	Group Home-MD	Sebastopol	10/17/00	2,400,000
Poway RHF Housing, Inc. - The Gateway	Multilevel	Poway	12/28/00	19,375,000
Burt Children's Center	Group Home-MD	San Francisco	04/18/01	3,200,000
El Centro Regional Medical Center	Hospital	El Centro	04/26/01	39,300,000
Desert AIDS Project, Inc	Clinic A.I.D.S.	Palm Springs	04/26/01	3,570,000
Southern California Alcohol and Drug Programs, Inc	CDRF	Downey	05/30/01	1,780,000
Prototypes	CDRF	Culver City	06/27/01	4,195,000
Social Model Recovery Systems, Inc.	CDRF	Covina	06/27/01	1,890,000
Fiscal Year 2000-01		Subtotal	9	77,005,000
		TOTAL	39	442,825,000

Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division

Summary
Number of Applications Pending and Pre-Applications
by Facility Type

As of June 30, 2001

Type of Facility	Number	Projected Loan Amount
Hospital	3	\$75,436,598
Clinic ⁽¹⁾		
Multi-Level ⁽²⁾	6	\$411,090,000
SNF ⁽³⁾		
CDRF ⁽⁴⁾	2	\$2,875,000
Group Homes ⁽⁵⁾	2	\$11,000,000
Other ⁽⁶⁾	3	\$22,500,000
Totals	16	\$522,901,598

(1) Primary Care Clinics

(2) Multi-level facilities that include residential units for the elderly, coupled with a skill nursing facility, an intermediate care facility, or a general acute care hospital.

(3) Skilled Nursing Facility. Some of these may actually be part of multi-level facility, but Cal-Mortgage / OSHPD only insures the skilled nursing facility portion.

(4) Chemical Dependency Recovery Facility, Adult Drug Abuse Treatment Facility, Alcohol Recovery Facility, Alcohol Free Living Centers, and Substance Abuse Recovery Facility.

(5) Group Homes include group homes for the developmentally disabled, community care facilities for the developmentally disabled, group homes for the developmentally disabled and mentally disabled or emotionally disturbed (provides residential care), group homes for the mentally disabled or emotionally disturbed (provides residential care), community care facility – group home (provides residential care).

(6) Other includes adult day care for the developmentally disabled, adult day health care, blood banks, birthing centers, A.I.D.S. clinics, dialysis clinics, mental health clinics, community mental health clinics, hospices, intermediate care facilities, and intermediate care facilities for the developmentally disabled.

Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division

Summary
Number of Projects and Insured Risk by Facility Type

As of June 30, 2001

Type of Facility	Number	Current Loan Amount
Hospital	29	\$332,487,235
Clinic ⁽¹⁾	38	\$88,234,467
Multi-Level ⁽²⁾	30	\$335,870,000
SNF ⁽³⁾	5	\$38,425,000
CDRF ⁽⁴⁾	26	\$57,948,242
Group Homes ⁽⁵⁾	28	\$104,420,562
Other ⁽⁶⁾	26	\$79,094,320
Totals	182	\$1,036,479,826

(1) Primary Care Clinics

(2) Multi-level facilities that include residential units for the elderly, coupled with a skill nursing facility, an intermediate care facility, or a general acute care hospital.

(3) Skilled Nursing Facility. Some of these may actually be part of multi-level facility, but Cal-Mortgage / OSHPD only insures the skilled nursing facility portion.

(4) Chemical Dependency Recovery Facility, Adult Drug Abuse Treatment Facility, Alcohol Recovery Facility, Alcohol Free Living Centers, and Substance Abuse Recovery Facility.

(5) Group Homes include group homes for the developmentally disabled, community care facilities for the developmentally disabled, group homes for the developmentally disabled and mentally disabled or emotionally disturbed (provides residential care), group homes for the mentally disabled or emotionally disturbed (provides residential care), community care facility – group home (provides residential care).

(6) Other includes adult day care for the developmentally disabled, adult day health care, blood banks, birthing centers, A.I.D.S. clinics, dialysis clinics, mental health clinics, community mental health clinics, hospices, intermediate care facilities, and intermediate care facilities for the developmentally disabled.

Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division
Listing of Insured Projects by Facility Type
(sorted by Facility Type then Borrower Name)
as of June 30, 2001

Facility Type	Borrower Name	Borrower City	Date Loan Insured	Original Insured Amount	Current Principal Balance
ADC-DD	Atascadero Committee For Education	Atascadero	9/4/1991	\$190,000	\$140,000
ADC-DD	Becoming Independent	Santa Rosa	2/29/1996	\$1,665,000	\$1,475,000
ADC-DD	Central Coast Neurobehavior Center, Inc.	Morro Bay	8/17/1989	\$410,000	\$340,000
ADC-DD	Hope Rehabilitation Service	Santa Clara	11/20/1990	\$6,500,000	\$5,550,000
ADC-DD	Orange County A R C	Anaheim	11/17/1999	\$4,500,000	\$4,415,000
Total	Adult Day Care: Developmentally Disabled		5	\$13,265,000	\$11,920,000
ADHC	Feedback Foundation, Inc.	Anaheim	12/30/1992	\$2,140,000	\$1,899,320
ADHC	Innovative Health Care Services	Chico	12/18/1990	\$540,000	\$435,000
ADHC	Mexican American Community Service Agency	San Jose	9/26/1989	\$1,480,000	\$1,250,000
ADHC	San Fernando Valley Community Mental Health Center	Van Nuys	6/26/1998	\$3,700,000	\$3,455,000
ADHC	United Cerebral Palsy	Santa Ana	9/17/1993	\$760,000	\$690,000
Total	Adult Day Health Care		5	\$8,620,000	\$7,729,320
BB	Blood Centers Of The Pacific	San Francisco	12/17/1991	\$8,500,000	\$7,405,000
BB	Sacramento Medical Foundation	Sacramento	5/6/1998	\$14,460,000	\$13,310,000
Total	Blood Bank		2	\$22,960,000	\$20,715,000
CDRF	Beacon House	San Pedro	12/8/1993	\$2,280,000	\$2,045,000
CDRF	Behavioral Health Services	Gardena	11/7/1996	\$10,845,000	\$9,825,000
CDRF	Bi - Bett Corporation	Concord	3/28/1991	\$1,400,000	\$600,000
CDRF	Clare Foundation	Santa Monica	8/22/1991	\$1,930,000	\$1,715,000
CDRF	Drug Abuse Alternatives Center	Santa Rosa	11/18/1993	\$1,825,000	\$1,655,000
CDRF	Henry Ohlhoff House	San Francisco	9/14/1990	\$1,000,000	\$860,000
CDRF	Horizon Services	Hayward	9/28/1992	\$1,140,000	\$1,025,000
CDRF	Janus Of Santa Cruz	Santa Cruz	3/24/1993	\$1,000,000	\$870,000
CDRF	Jeffrey Foundation	Los Angeles	12/18/1992	\$305,000	\$265,000
CDRF	Los Angeles Centers For Alcohol & Drug Abuse	Santa Fe Springs	1/29/1997	\$1,515,000	\$1,405,000
CDRF	Midvalley Recovery Services	El Monte	1/25/1991	\$1,175,000	\$1,015,000
CDRF	Milestones Human Services, Inc.	San Francisco	7/17/1997	\$2,795,000	\$2,665,000
CDRF	National Council On Alcoh. & Drug Depend. Of The South Bay	Torrance	3/24/1993	\$1,290,000	\$1,130,000
CDRF	Principles Inc.	Pasadena	8/22/1991	\$2,245,000	\$1,995,000
CDRF	Prototypes	Culver City	6/23/1993	\$2,530,000	\$1,950,000
CDRF	Prototypes	Culver City	6/27/2001	\$4,195,000	\$4,195,000

Facility Type	Borrower Name	Borrower City	Date Loan Insured	Original Insured Amount	Current Principal Balance
CDRF	Social Model Recovery Systems, Inc.	Covina	3/19/1993	\$935,000	\$835,000
CDRF	Social Model Recovery Systems, Inc.	Covina	6/27/2001	\$1,890,000	\$1,890,000
CDRF	Social Science Services, Inc.	Bloomington	4/28/2000	\$1,970,000	\$1,970,000
CDRF	Southern California Alcohol & Drug Program	Downey	12/30/1992	\$1,315,000	\$1,168,242
CDRF	Southern California Alcohol & Drug Program	Downey	6/11/1993	\$775,000	\$700,000
CDRF	Southern California Alcohol & Drug Program	Downey	12/18/1997	\$4,095,000	\$3,840,000
CDRF	Southern California Alcohol And Drug Programs, Inc.	Downey	5/30/2001	\$1,780,000	\$1,780,000
CDRF	Tarzana Treatment Center, Tarzana	Tarzana	12/9/1998	\$1,950,000	\$1,870,000
CDRF	Walden House Inc.	San Francisco	6/27/2000	\$3,000,000	\$2,975,000
CDRF	Walden House, Inc.	San Francisco	3/24/1992	\$8,800,000	\$7,705,000
Total	Chemical Dependency Recovery Facility		26	\$63,980,000	\$57,948,242
CLINIC-AIDS	Center For Aids Research, Education & Services	Sacramento	4/30/1998	\$3,330,000	\$3,070,000
CLINIC-AIDS	Desert Aids Project, Inc.	Palm Springs	4/26/2001	\$3,570,000	\$3,570,000
Total	Clinic : A.I.D.S.		2	\$6,900,000	\$6,640,000
CLINIC-MH	Airport Marina Counseling Services	Westchester	9/27/1995	\$735,000	\$645,000
CLINIC-MH	Alliance For Community Care	San Jose	12/23/1992	\$2,600,000	\$2,335,000
CLINIC-MH	Asian Americans For Community Involvement For Santa Clara	San Jose	10/28/1992	\$4,800,000	\$4,300,000
CLINIC-MH	Desarrollo Familiar	Richmond	12/23/1986	\$150,000	\$115,000
CLINIC-MH	Eastfield Ming Quong	Campbell	10/2/1992	\$1,040,000	\$935,000
CLINIC-MH	Henrietta Weill Memorial	Bakersfield	10/14/1992	\$1,445,000	\$1,075,000
CLINIC-MH	Pacific Clinics	Arcadia	6/2/1988	\$5,455,000	\$4,540,000
CLINIC-MH	Verdugo Mental Health Center	Glendale	12/16/1993	\$1,000,000	\$900,000
Total	Clinic : Mental Health		8	\$17,225,000	\$14,845,000
CLINIC-PC	Altamed Health Services	Commerce	4/28/2000	\$5,250,000	\$5,250,000
CLINIC-PC	Asian Health Services	Oakland	11/21/1995	\$6,500,000	\$5,885,000
CLINIC-PC	Big Valley Medical Center	Bieber	3/24/1993	\$900,000	\$711,655
CLINIC-PC	Butte Valley - Tulelake Rural Health Projects Inc.	Dorris	10/28/1992	\$1,000,000	\$895,000
CLINIC-PC	Central Valley Indian Health, Inc.	Clovis	4/28/2000	\$1,055,000	\$1,055,000
CLINIC-PC	Clinica De Salud Del Valle De Salinas	Salinas	7/26/1989	\$580,000	\$485,000
CLINIC-PC	Clinicas De Salud Del Pueblo	Brawley	7/2/1992	\$1,720,000	\$1,545,000
CLINIC-PC	Clinicas De Salud Del Pueblo	Brawley	6/26/1998	\$3,250,000	\$3,095,000
CLINIC-PC	Clinicas De Salud Del Valle De Salinas	Salinas	7/2/1992	\$1,450,000	\$1,305,000
CLINIC-PC	Clinicas Del Camino Real, Incorporated	Ventura	3/13/1990	\$2,800,000	\$2,390,000
CLINIC-PC	Clinicas Del Camino Real, Incorporated	Ventura	11/15/1993	\$550,000	\$495,000
CLINIC-PC	Clinicas Del Camino Real, Incorporated	Ventura	5/24/1995	\$7,225,000	\$6,690,000
CLINIC-PC	Community Health Centers Of The Central Coast, Inc.	Nipomo	7/17/1990	\$770,000	\$655,000

Facility Type	Borrower Name	Borrower City	Date Loan Insured	Original Insured Amount	Current Principal Balance
CLINIC-PC	Community Health System, Inc.	Bloomington	8/30/2000	\$1,295,000	\$1,295,000
CLINIC-PC	Community Medical Center, Inc.	Stockton	10/12/1994	\$3,050,000	\$2,850,000
CLINIC-PC	Del Norte Clinics, Inc.	Yuba City	5/28/1993	\$1,285,000	\$1,145,000
CLINIC-PC	Del Norte Clinics, Inc.	Yuba City	4/28/2000	\$1,105,000	\$1,105,000
CLINIC-PC	El Proyecto Del Barrio	Arleta	12/4/1990	\$2,040,000	\$1,735,000
CLINIC-PC	El Proyecto Del Barrio	Arleta	12/16/1997	\$4,575,000	\$4,370,000
CLINIC-PC	Gardner Family Health Network	San Jose	7/26/1989	\$1,670,000	\$605,000
CLINIC-PC	Gardner Family Health Network	San Jose	8/30/1995	\$5,000,000	\$4,400,000
CLINIC-PC	Golden Valley Health Centers	Merced	10/30/1990	\$445,000	\$390,000
CLINIC-PC	Golden Valley Health Centers	Merced	1/28/1994	\$3,785,000	\$3,420,000
CLINIC-PC	Humboldt Open Door Clinic	Arcata	4/28/2000	\$1,195,000	\$1,195,000
CLINIC-PC	Isla Vista Community Clinic	Isla Vista	7/7/1988	\$450,000	\$365,000
CLINIC-PC	Lifelong Medical Care, Incorporated	Berkeley	12/14/1998	\$2,970,000	\$2,970,000
CLINIC-PC	North County Health Services Inc.	San Marcos	3/14/1996	\$5,500,000	\$5,015,000
CLINIC-PC	Northcountry Clinic	Arcata	7/7/1988	\$585,000	\$475,000
CLINIC-PC	Redwoods Rural Health Center, Inc.	Redway	3/13/1990	\$1,250,000	\$1,065,000
CLINIC-PC	Redwoods Rural Health Center, Inc.	Redway	5/19/1999	\$200,000	\$197,812
CLINIC-PC	Salud Para La Gente	Watsonville	4/28/2000	\$2,285,000	\$2,285,000
CLINIC-PC	San Benito Health Foundation	Hollister	11/28/1990	\$2,485,000	\$2,170,000
CLINIC-PC	Sansum Santa Barbara Medical Foundation Clinic	Goleta	8/8/1989	\$15,000,000	\$12,570,000
CLINIC-PC	Sequoia Community Health Foundation	Fresno	11/18/1993	\$2,430,000	\$2,205,000
CLINIC-PC	Sequoia Community Health Foundation	Fresno	4/28/2000	\$1,905,000	\$1,905,000
CLINIC-PC	United Health Center Of The San Joaquin Valley, Inc.	Parlier	4/28/2000	\$950,000	\$950,000
CLINIC-PC	Valley Health Team, Inc.	San Joaquin	3/13/1990	\$1,025,000	\$870,000
CLINIC-PC	West Oakland Health Council, Inc.	Oakland	10/24/1990	\$2,500,000	\$2,225,000
Total	Clinic: Primary Care		38	\$98,030,000	\$88,234,467
GH-DD	Gateway Center	Pacific Grove	5/11/1993	\$850,000	\$755,000
GH-DD	Group Home: Developmentally Disabled		1	\$850,000	\$755,000
GH-DD/MD	Achieve	Palo Alto	7/8/1991	\$385,000	\$340,000
GH-DD/MD	California Autism Foundation Inc.	Richmond	11/8/1995	\$4,700,000	\$4,195,000
GH-DD/MD	Canyon Acres Children'S Services	Anaheim	8/21/1991	\$975,000	\$845,000
GH-DD/MD	Exceptional Children'S Foundation	Los Angeles	9/27/1995	\$2,990,000	\$2,610,000
GH-DD/MD	Families First, Inc.	Davis	3/15/2000	\$17,600,000	\$17,600,000
GH-DD/MD	Home Of The Guiding Hands Corporation	Lakeside	8/2/1991	\$2,830,000	\$2,445,000
GH-DD/MD	Southern Calif. Development Corp. Of V O A, Inc.	La Mesa	1/12/1996	\$3,500,000	\$3,010,000
GH-DD/MD	The H. E. L. P. Group	Sherman Oaks	5/22/1998	\$17,275,000	\$16,480,000
GH-DD/MD	The H. E. L. P. Group	Sherman Oaks	5/25/2000	\$17,620,000	\$17,620,000

Facility Type	Borrower Name	Borrower City	Date Loan Insured	Original Insured Amount	Current Principal Balance
GH-DD/MD	Thessalonika Family Services	Temecula	12/19/1995	\$1,360,000	\$1,145,000
GH-DD/MD	True To Life Children'S Services	Sebastopol	10/17/2000	\$2,400,000	\$2,400,000
Total	Group Home: Developmentally Disabled and Mentally Disabled		11	\$71,635,000	\$68,690,000
GH-MD	Advent Group Ministries, Inc	San Jose	2/28/1991	\$1,025,000	\$895,000
GH-MD	Aldea Inc.	Napa	6/27/1990	\$495,000	\$430,000
GH-MD	Alliance For Community Care	San Jose	10/8/1992	\$7,500,000	\$6,625,000
GH-MD	Burt Center, Inc.	San Francisco	4/18/2001	\$3,200,000	\$3,200,000
GH-MD	Childnet Youth And Family Services, Inc.	Long Beach	4/12/1993	\$1,200,000	\$1,070,000
GH-MD	Children'S Institute International.	Los Angeles	2/27/1992	\$5,635,000	\$5,015,000
GH-MD	Eastfield Ming Quong	Campbell	3/11/1997	\$7,025,000	\$6,280,000
GH-MD	Guadalupe Homes - Colton	Colton	12/26/1991	\$2,425,000	\$2,065,000
GH-MD	Guadalupe Homes - Colton	Colton	4/4/1994	\$1,380,000	\$785,000
GH-MD	Interim, Inc.	Monterey	6/24/1991	\$750,000	\$650,000
GH-MD	Lincoln Child Center, Inc.	Oakland	11/23/1999	\$2,900,000	\$2,900,000
GH-MD	Mental Health Systems Inc.	San Diego	12/30/1992	\$650,000	\$575,000
GH-MD	Olive Crest Treatment Center.	Santa Ana	12/30/1992	\$2,280,000	\$2,025,562
GH-MD	Sanctuary Psychiatric Centers Of Santa Barbara	Santa Barbara	1/16/1991	\$810,000	\$705,000
GH-MD	Seneca Residential And Day Treatment Center	San Leandro	7/13/1990	\$320,000	\$170,000
GH-MD	True To Life Children'S Services	Sebastopol	9/17/1997	\$1,700,000	\$1,585,000
Total	Group Home: Mentally Disabled or Emotionally Disturbed		16	\$39,295,000	\$34,975,562
HOSP	El Centro Regional Medical Center	El Centro	4/26/2001	\$39,300,000	\$39,300,000
HOSP	Henry Mayo Newhall Memorial Hospital	Valencia	2/21/2001	\$54,895,000	\$54,895,000
HOSP	Lodi Memorial Hospital Association, Inc.	Lodi	10/26/2000	\$12,570,000	\$12,570,000
HOSP	Madera Community Hospital	Madera	3/11/1993	\$10,200,000	\$6,280,000
HOSP	Marshall Hospital	Placerville	10/6/1993	\$19,975,000	\$15,230,000
HOSP	Marshall Hospital	Placerville	5/13/1998	\$28,030,000	\$26,415,000
HOSP	Modoc County Medical Center	Alturas	6/28/1990	\$2,515,000	\$1,525,000
HOSP	Oroville Hospital	Oroville	10/15/1997	\$27,670,000	\$25,775,000
HOSP	Oroville Hospital	Oroville	11/8/2000	\$2,500,000	\$1,655,135
HOSP	Redlands Community Hospital	Redlands	3/17/1987	\$37,620,000	\$7,470,000
HOSP	Redlands Community Hospital	Redlands	7/26/1990	\$3,997,148	\$2,867,148
HOSP	Sherman Oaks Health System	Sherman Oaks	12/17/1999	\$2,000,000	\$1,900,000
HOSP	St. Luke'S Hospital - S. F.	San Francisco	7/15/1997	\$9,815,000	\$8,600,000
HOSP	V C H S - Valley Memorial Hospital	Pleasanton	7/7/1993	\$11,660,000	\$10,030,000
HOSP	V C H S - Valleycare Hospital Corporation	Pleasanton	5/6/1992	\$8,500,000	\$6,205,000
HOSP	V C H S - Valleycare Hospital Corporation	Pleasanton	7/22/1997	\$37,165,000	\$33,350,000
HOSP	Victor Valley Community Hospital	Victorville	10/28/1999	\$3,000,000	\$2,307,372

Facility Type	Borrower Name	Borrower City	Date Loan Insured	Original Insured Amount	Current Principal Balance
HOSP	Victor Valley Community Hospital	Victorville	5/26/2000	\$8,470,000	\$8,470,000
HOSP	West Contra Costa Healthcare District	Richmond	1/24/1997	\$5,000,000	\$3,656,588
Total	Hospital: General Acute Care		19	\$324,882,148	\$268,501,244
HOSP-DIST	Corcoran District Hospital	Corcoran	7/23/1992	\$1,555,000	\$1,180,000
HOSP-DIST	John C. Fremont Hospital District	Mariposa	10/11/1994	\$5,840,000	\$5,435,000
HOSP-DIST	Kern Valley Healthcare District	Mountain Mesa	2/15/1991	\$20,590,000	\$17,770,000
HOSP-DIST	Kern Valley Healthcare District	Mountain Mesa	6/23/2000	\$2,000,000	\$1,130,991
HOSP-DIST	Lompoc District Hospital	Lompoc	9/23/1998	\$6,375,000	\$5,955,000
HOSP-DIST	Mayers Memorial Hospital District	Fall River Mills	1/27/1994	\$9,220,000	\$7,465,000
HOSP-DIST	Mendocino Coast Health Care District	Fort Bragg	8/28/1996	\$4,030,000	\$3,585,000
HOSP-DIST	Sonoma Valley Hospital District	Sonoma	12/13/1984	\$12,445,000	\$2,605,000
HOSP-DIST	Sonoma Valley Hospital District	Sonoma	2/11/1987	\$8,940,000	\$6,630,000
HOSP-DIST	Tulare Local Healthcare District	Tulare	12/4/1998	\$12,920,000	\$12,230,000
Total	Hospital - District: General Acute Care		10	\$83,915,000	\$63,985,991
HOSPICE	Aids Healthcare Foundation	Los Angeles	10/22/1992	\$5,855,000	\$4,770,000
HOSPICE	Aids Healthcare Foundation	Los Angeles	11/10/1994	\$3,300,000	\$3,040,000
HOSPICE	Aids Healthcare Foundation	Los Angeles	5/17/2001	\$2,000,000	\$975,000
Total			3	\$11,155,000	\$8,785,000
ICF-DD	A R C - San Diego	San Diego	7/23/1997	\$9,260,000	\$8,460,000
Total	Intermediate Care Facility: Developmentally Disabled		1	\$9,260,000	\$8,460,000
MULTI-CCRC	Aldersly, Inc.	San Rafael	5/29/1991	\$2,000,000	\$1,735,000
MULTI-CCRC	Atherton Baptist Homes	Alhambra	2/5/1987	\$11,470,000	\$8,530,000
MULTI-CCRC	Casa De Las Campanas	San Diego	6/9/1998	\$45,340,000	\$42,585,000
MULTI-CCRC	Montecito Retirement Association	Montecito	7/13/1993	\$19,430,000	\$15,830,000
MULTI-CCRC	Redwood Senior Homes & Services	Glendale	7/16/1991	\$15,200,000	\$12,000,000
MULTI-CCRC	Solheim Lutheran Home	Los Angeles	6/23/1994	\$8,230,000	\$6,975,000
MULTI-CCRC	Solvang Lutheran Home	Solvang	8/27/1996	\$5,210,000	\$4,590,000
MULTI-CCRC	Sunny View Lutheran Home	Cupertino	9/17/1997	\$4,430,000	\$3,975,000
MULTI-CCRC	Sunny View Lutheran Home	Cupertino	2/25/1999	\$5,685,000	\$5,555,000
Total	Multi-level Facility: Continuing Care Retirement Caommunity		9	\$116,995,000	\$101,775,000
MULTI-OTH	Ararat Home Of Los Angeles	Mission Hills	4/29/1998	\$6,460,000	\$5,955,000
MULTI-OTH	California Odd Fellows Housing Of Napa, Inc.	Napa	10/6/1993	\$18,995,000	\$17,515,000
MULTI-OTH	Catholic Healthcare West	San Francisco	3/17/1993	\$9,360,000	\$7,540,000
MULTI-OTH	Community Church Retirement Center	Mill Valley	3/11/1997	\$6,115,000	\$5,595,000

Facility Type	Borrower Name	Borrower City	Date Loan Insured	Original Insured Amount	Current Principal Balance
MULTI-OTH	Eden Hospital Health Services Corp.	Castro Valley	7/29/1993	\$23,675,000	\$19,855,000
MULTI-OTH	Fellowship Homes, Inc.	Modesto	8/27/1996	\$6,065,000	\$5,475,000
MULTI-OTH	Friends Association Of Services For The Elderly	Santa Rosa	10/14/1992	\$1,140,000	\$470,000
MULTI-OTH	Friends Association Of Services For The Elderly	Santa Rosa	8/12/1993	\$2,000,000	\$1,830,000
MULTI-OTH	Home For Jewish Parents	Danville	7/9/1997	\$12,555,000	\$11,940,000
MULTI-OTH	Lincoln Glen Manor For Senior Citizens	San Jose	3/9/2000	\$7,500,000	\$7,500,000
MULTI-OTH	Odd Fellows Home Of California	Saratoga	10/14/1999	\$34,500,000	\$34,500,000
MULTI-OTH	Onlok Inc.	San Francisco	12/22/1992	\$13,300,000	\$12,140,000
MULTI-OTH	Redwood Senior Homes & Services	Glendale	7/8/1997	\$6,120,000	\$5,715,000
MULTI-OTH	Retirement Housing Foundation, Inc.	Long Beach	12/28/2000	\$19,375,000	\$19,375,000
MULTI-OTH	San Diego Christian Foundation	San Diego	8/4/1992	\$8,360,000	\$7,515,000
MULTI-OTH	Scott Street Senior Housing Complex, Inc.	San Francisco	6/18/1998	\$37,770,000	\$37,770,000
MULTI-OTH	Sierra View Homes	Reedley	12/18/1996	\$4,425,000	\$3,995,000
MULTI-OTH	St. Paul'S Episcopal Home, Inc.	San Diego	9/13/1994	\$7,140,000	\$5,775,000
MULTI-OTH	Sunset Haven	Ontario	8/28/1997	\$6,320,000	\$5,875,000
MULTI-OTH	Walker Senior Housing Corporation V I I - The Lodge	Chico	3/1/1991	\$15,000,000	\$12,965,000
MULTI-OTH	Walker Senior Housing Corporation V I I - The Lodge	Chico	11/17/1993	\$5,270,000	\$4,795,000
Total	Multi-level Facility: Other		21	\$251,445,000	\$234,095,000
SNF	Apple Valley Christian Centers	Apple Valley	5/24/2001	\$9,525,000	\$9,525,000
SNF	Asian Community Skilled Nursing Facility	Sacramento	10/14/1992	\$3,160,000	\$2,480,000
SNF	Keiro Nursing Home	Los Angeles	3/10/1994	\$10,675,000	\$8,995,000
SNF	Lytton Gardens, Inc.	Palo Alto	12/9/1999	\$16,355,000	\$16,345,000
SNF	St. Luke Manor	Fortuna	12/10/1991	\$1,480,000	\$1,080,000
Total	Skilled Nursing Facility: Stand Alone		5	\$41,195,000	\$38,425,000
Totals			182	\$1,181,607,148	\$1,036,479,826

ADC: DD - Adult Day Care: Developmentally Disabled
ADHC - Adult Day Health Care
BB - Blood Banks
CDRF - Chemical Dependency Recovery Facility
CDC: DD - Child Day Care: Deveopmentally Disabled
Clinic: AIDS - Clinic: A.I.D.S.
Clinic: MH - Clinic: Mental Health
Clinic: PC - Clinic: Primary Care
GH: DD - Group Home: Developmentally Disabled
GH: DD & MD - Group Home: Developmentally Disabled and Mentally Disabled or Emotionally Distrubed

GH: MD - Group Home: Mentally Disabled or Emotionally Disturbed
Hosp: Dist - Hospital: District
Hosp - Hospital: General Acute Care
ICF: DD - Intermediate Care Facility: Developmentally Disabled
Multi: CCRC - Multi-level Facility: CCRC
Multi: Other - Multi-level Facility: Other (Month-to-Month)
SNF - Skilled Nursing Facility: Stand Alone

Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division

Exhibit 9

Summary of Projects by County

as of June 30, 2001

County	Number of Projects	Original Principal Balance	Current Principal Balance
Alameda	9	\$90,830,000	\$78,730,000
Butte	5	\$50,980,000	\$45,625,135
Contra Costa	6	\$30,305,000	\$26,391,588
El Dorado	2	\$48,005,000	\$41,645,000
Fresno	5	\$9,360,000	\$8,775,000
Humboldt	5	\$4,710,000	\$4,012,812
Imperial	4	\$47,770,000	\$46,950,000
Kern	3	\$24,035,000	\$19,975,991
Kings	1	\$1,555,000	\$1,180,000
Lassen	1	\$900,000	\$711,655
Los Angeles	35	\$213,700,000	\$197,780,000
Madera	1	\$10,200,000	\$6,280,000
Marin	4	\$9,665,000	\$8,685,000
Mariposa	1	\$5,840,000	\$5,435,000
Mendocino	2	\$5,410,000	\$4,370,000
Merced	1	\$7,140,000	\$5,775,000
Modoc	1	\$2,515,000	\$1,525,000
Monterey	4	\$3,630,000	\$3,195,000
Napa	2	\$1,949,000	\$17,945,000
Orange	9	\$19,795,000	\$18,168,124
Riverside	2	\$4,930,000	\$4,715,000
Sacramento	5	\$32,735,000	\$28,465,000
San Benito	1	\$2,485,000	\$2,170,000
San Bernardino	8	\$72,197,148	\$39,779,520
San Diego	11	\$117,345,000	\$107,935,000
San Francisco	7	\$83,980,000	\$79,260,000
San Joaquin	2	\$15,620,000	\$15,420,000
San Luis Obispo	3	\$1,370,000	\$1,135,000
Santa Barbara	6	\$75,400,000	\$68,560,000
Santa Clara	15	\$69,945,000	\$64,360,000
Santa Cruz	2	\$4,200,000	\$4,070,000
Shasta	1	\$9,220,000	\$7,465,000
Siskiyou	1	\$1,000,000	\$1,000,000
Sonoma	8	\$32,115,000	\$18,650,000
Stanislaus	2	\$6,510,000	\$5,865,000
Tulare	1	\$12,920,000	\$12,230,000
Ventura	3	\$13,810,000	\$12,500,000
Yolo	1	\$17,600,000	\$17,600,000
Yuba	2	\$2,390,000	\$2,250,000
39 Counties	182	\$1,164,066,148	\$1,036,584,825

Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division
Listing of Insured Projects by County
(sorted by County and then Borrower Name)
as of June 30, 2001

Borrower Name	Project Name	Borrower / Project City	ZIP	County	Facility Type	Insured Date	Original Insured Amount	Current Principal Balance
Asian Health Services, Inc.	Asian Health Services	Oakland	94607	Alameda	CLINIC-PC	11/21/1995	6,500,000	5,885,000
Eden Hospital Health Services Corp.	Eden Hospital Health Services Corp.	Castro Valley	94546	Alameda	MULTI-OTH	7/29/1993	23,675,000	19,855,000
Horizon Services	Horizon Services, Inc.	Hayward	94557	Alameda	CDRF	9/28/1992	1,140,000	1,025,000
Lifelong Medical Care, Incorporated	Over 60 Health Clinic	Berkeley	94710	Alameda	CLINIC-PC	12/14/1998	2,970,000	2,970,000
Lincoln Child Center, Inc.	Lincoln Child Center, Inc.	Oakland	94602	Alameda	GH-MD	11/23/1999	2,900,000	2,900,000
Seneca Residential And Day Treatment Center	Seneca Residential And Day Treatment Center	San Leandro	94578	Alameda	GH-MD	7/13/1990	320,000	170,000
V C H S - Valley Memorial Hospital	Valley Memorial Hospital	Pleasanton	94588	Alameda	HOSP	7/7/1993	11,660,000	10,030,000
V C H S - Valleycare Hospital Corporation	Valleycare Medical Center	Pleasanton	94588	Alameda	HOSP	5/6/1992	8,500,000	6,205,000
V C H S - Valleycare Hospital Corporation	Valleycare Medical Center	Pleasanton	94588	Alameda	HOSP	7/22/1997	37,165,000	33,350,000
West Oakland Health Council, Inc.	West Oakland Community Clinic	Oakland	94607	Alameda	CLINIC-PC	10/24/1990	2,500,000	2,225,000
				Alameda		10	97,330,000	84,615,000
Innovative Health Care Services	Peg Taylor Center For Adult Day Healthcare	Chico	95926	Butte	ADHC	12/18/1990	540,000	435,000
Oroville Hospital	Oroville Hospital	Oroville	95966	Butte	HOSP	10/15/1997	27,670,000	25,775,000
Oroville Hospital	Oroville Hospital - L O C	Oroville	95966	Butte	HOSP	11/8/2000	2,500,000	1,655,135
Walker Senior Housing Corporation V I I - The Lodge	Sierra Sunrise Lodge	Chico	95928	Butte	MULTI-OTH	3/1/1991	15,000,000	12,965,000
Walker Senior Housing Corporation V I I - The Lodge	Sierra Sunrise Lodge	Chico	95928	Butte	MULTI-OTH	11/17/1993	5,270,000	4,795,000
				Butte		5	50,980,000	45,625,135
Bi - Bett Corporation	Bi - Bett Corporation	Concord	94524	Contra Costa	CDRF	3/28/1991	1,400,000	600,000
California Autism Foundation Inc.	California Autism Foundation, Inc.	Richmond	94806	Contra Costa	GH-DD/MD	11/8/1995	4,700,000	4,195,000
Desarrollo Familiar	Desarrollo Familiar	Richmond	94805	Contra Costa	CLINIC-MH	12/23/1986	150,000	115,000
Home For Jewish Parents	Home For Jewish Parents	Danville	94506	Contra Costa	MULTI-OTH	7/9/1997	12,555,000	11,940,000
West Contra Costa Healthcare District	West Contra Costa Health Care District	Richmond	94806	Contra Costa	HOSP	1/24/1997	5,000,000	3,656,588
				Contra Costa		5	23,805,000	20,506,588
Marshall Hospital	Marshall Hospital	Placerville	95667	El Dorado	HOSP	10/6/1993	19,975,000	15,230,000
Marshall Hospital	Marshall Hospital	Placerville	95667	El Dorado	HOSP	5/13/1998	28,030,000	26,415,000
				El Dorado		2	48,005,000	41,645,000
Central Valley Indian Health, Inc.	Central Valley Indian Health, Inc.	Clovis	93612	Fresno	CLINIC-PC	4/28/2000	1,055,000	1,055,000
Sequoia Community Health Foundation	Sequoia Community Health Foundation	Fresno	93706	Fresno	CLINIC-PC	11/18/1993	2,430,000	2,205,000
Sequoia Community Health Foundation	Sequoia Community Health Foundation	Fresno	93706	Fresno	CLINIC-PC	4/28/2000	1,905,000	1,905,000
Sierra View Homes	Sierra View Homes Incorporated	Reedley	93654	Fresno	MULTI-OTH	12/18/1996	4,425,000	3,995,000
United Health Center Of The San Joaquin Valley, Inc.	United Health Centers Of The San Joaquin Valley, Inc.	Parlier	93648	Fresno	CLINIC-PC	4/28/2000	950,000	950,000
Valley Health Team, Inc.	Valley Health Team, Inc.	San Joaquin	93660	Fresno	CLINIC-PC	3/13/1990	1,025,000	870,000
				Fresno		6	11,790,000	10,980,000
Del Norte Clinics, Inc.	Del Norte Clinics, Inc., Orland	Orland	95963	Glenn	CLINIC-PC	4/28/2000	1,105,000	1,105,000
				Glenn		1	1,105,000	1,105,000

Borrower Name	Project Name	Borrower / Project City	ZIP	County	Facility Type	Insured Date	Original Insured Amount	Current Principal Balance
Humboldt Open Door Clinic	Humboldt Open Door	Arcata	95521	Humboldt	CLINIC-PC	4/28/2000	1,195,000	1,195,000
Northcountry Clinic	Northcountry Clinic	Arcata	95521	Humboldt	CLINIC-PC	7/7/1988	585,000	475,000
Redwoods Rural Health Center, Inc.	Redwoods Rural Health Center	Redway	95560	Humboldt	CLINIC-PC	3/13/1990	1,250,000	1,065,000
Redwoods Rural Health Center, Inc.	Redwood Rural Health Center, Inc. - L O C	Redway	95560	Humboldt	CLINIC-PC	5/19/1999	200,000	197,812
St. Luke Manor	St. Luke Manor	Fortuna	95540	Humboldt	SNF	12/10/1991	1,480,000	1,080,000
				Humboldt		5	4,710,000	4,012,812
Clinicas De Salud Del Pueblo	Clinicas De Salud Del Pueblo	Brawley	92227	Imperial	CLINIC-PC	7/2/1992	1,720,000	1,545,000
Clinicas De Salud Del Pueblo	Clinicas De Salud Del Pueblo	Brawley	92227	Imperial	CLINIC-PC	6/26/1998	3,250,000	3,095,000
El Centro Regional Medical Center	El Centro Regional Medical Center	El Centro	92243	Imperial	HOSP	4/26/2001	39,300,000	39,300,000
Southern Calif. Development Corp. Of V O A, Inc.	Southern Calif. Development Corporation Of V O A, Inc.	El Centro	92243	Imperial	GH-DD/MD	1/12/1996	3,500,000	3,010,000
				Imperial		4	47,770,000	46,950,000
Henrietta Weill Memorial	Henrietta Weill Memorial Child Guidance Center	Bakersfield	93309	Kern	CLINIC-MH	10/14/1992	1,445,000	1,075,000
Kern Valley Healthcare District	Kern Valley Healthcare District	Mountain Mesa	93240	Kern	HOSP-DIST	2/15/1991	20,590,000	17,770,000
Kern Valley Healthcare District	Kern Valley Healthcare District - L O C	Mountain Mesa	93240	Kern	HOSP-DIST	6/23/2000	2,000,000	1,130,991
				Kern		3	24,035,000	19,975,991
Corcoran District Hospital	Corcoran District Hospital	Corcoran	93212	Kings	HOSP-DIST	7/23/1992	1,555,000	1,180,000
				Kings		1	1,555,000	1,180,000
Big Valley Medical Center	Big Valley Medical Center, The	Bieber	96009	Lassen	CLINIC-PC	3/24/1993	900,000	711,655
				Lassen		1	900,000	711,655
Aids Healthcare Foundation	Aids Healthcare Foundation	Los Angeles	90028	Los Angeles	HOSPICE	10/22/1992	5,855,000	4,770,000
Aids Healthcare Foundation	Aids Healthcare Foundation	Los Angeles	90028	Los Angeles	HOSPICE	11/10/1994	3,300,000	3,040,000
Aids Healthcare Foundation	A.I.D.S. Healthcare Foundation	Los Angeles	90028	Los Angeles	HOSPICE	5/17/2001	2,000,000	975,000
Airport Marina Counseling Services	Airport Marina Counseling Services	Westchester	90045	Los Angeles	CLINIC-MH	9/27/1995	735,000	645,000
Altamed Health Services	Alta Med Health Services	Commerce	90040	Los Angeles	CLINIC-PC	4/28/2000	5,250,000	5,250,000
Ararat Home Of Los Angeles	Ararat Home Of Los Angeles, Inc.	Mission Hills	91345	Los Angeles	MULTI-OTH	4/29/1998	6,460,000	5,955,000
Atherton Baptist Homes	Atherton Baptist Homes	Alhambra	91801	Los Angeles	MULTI-CCRC	2/5/1987	11,470,000	8,530,000
Beacon House	Beacon House Association, the	San Pedro	90731	Los Angeles	CDRF	12/8/1993	2,280,000	2,045,000
Behavioral Health Services	Behavioral Health Services	Gardena	90249	Los Angeles	CDRF	11/7/1996	10,845,000	9,825,000
Childnet Youth And Family Services, Inc.	Childnet Youth And Family Services, Inc.	Long Beach	90804	Los Angeles	GH-MD	4/12/1993	1,200,000	1,070,000
Children's Institute International	Children's Institute International	Los Angeles	90005	Los Angeles	GH-MD	2/27/1992	5,635,000	5,015,000
Clare Foundation	Clare Foundation, Inc.	Santa Monica	90404	Los Angeles	CDRF	8/22/1991	1,930,000	1,715,000
El Proyecto Del Barrio	El Proyecto Del Barrio	Arlota	91331	Los Angeles	CLINIC-PC	12/4/1990	2,040,000	1,735,000
El Proyecto Del Barrio	Center For A Healthy Community	Arlota	91331	Los Angeles	CLINIC-PC	12/16/1997	4,575,000	4,370,000
Exceptional Children's Foundation	Exceptional Children's Foundation	Los Angeles	90008	Los Angeles	GH-DD/MD	9/27/1995	2,990,000	2,610,000
Henry Mayo Newhall Memorial Hospital	Henry Mayo Newhall Memorial Hospital	Valencia	91355	Los Angeles	HOSP	2/21/2001	54,895,000	54,895,000
Jeffrey Foundation	Jeffrey Foundation, The	Los Angeles	90016	Los Angeles	CDRF	12/18/1992	305,000	265,000
Keiro Nursing Home	Keiro Nursing Homes	Los Angeles	90033	Los Angeles	SNF	3/10/1994	10,675,000	8,995,000
Los Angeles Centers For Alcohol & Drug Abuse	Los Angeles Centers For Alcohol And Drug Abuse	Santa Fe Springs	90706	Los Angeles	CDRF	1/29/1997	1,515,000	1,405,000
Midvalley Recovery Services	Midvalley Alcohol Education Center	El Monte	91732	Los Angeles	CDRF	1/25/1991	1,175,000	1,015,000
National Council On Alcoh. & Drug Depend. Of The South	South Bay Alcoholism Services	Torrance	90501	Los Angeles	CDRF	3/24/1993	1,290,000	1,130,000
Pacific Clinics	Pacific Clinics	Arcadia	91106	Los Angeles	CLINIC-MH	6/2/1988	5,455,000	4,540,000

Borrower Name	Project Name	Borrower / Project City	ZIP	County	Facility Type	Insured Date	Original Insured Amount	Current Principal Balance
Principles Inc.	Principles, Inc.	Pasadena	91103	Los Angeles	CDRF	8/22/1991	2,245,000	1,995,000
Prototypes	Prototypes	Culver City	90230	Los Angeles	CDRF	6/23/1993	2,530,000	1,950,000
Prototypes	Prototypes	Culver City	90230	Los Angeles	CDRF	6/27/2001	4,195,000	4,195,000
San Fernando Valley Community Mental Health Center	San Fernando Valley Community Mental Health Center, In	Van Nuys	91405	Los Angeles	ADHC	6/26/1998	3,700,000	3,455,000
Sherman Oaks Health System	Sherman Oaks - L O C	Sherman Oaks	91403	Los Angeles	HOSP	12/17/1999	2,000,000	1,900,000
Social Model Recovery Systems, Inc.	Social Model Recovery Systems, Inc.	Azusa	91702	Los Angeles	CDRF	3/19/1993	935,000	835,000
Social Model Recovery Systems, Inc.	Social Model Recovery Systems, Inc.	Covina	91723	Los Angeles	CDRF	6/27/2001	1,890,000	1,890,000
Solheim Lutheran Home	Solheim Lutheran Home	Los Angeles	90041	Los Angeles	MULTI-CCRC	6/23/1994	8,230,000	6,975,000
Southern California Alcohol & Drug Program	S C A D P	Downey	90241	Los Angeles	CDRF	6/11/1993	775,000	700,000
Southern California Alcohol & Drug Program	S C A D P - Corporate	Downey	90241	Los Angeles	CDRF	12/18/1997	4,095,000	3,840,000
Southern California Alcohol And Drug Programs, Inc.	Southern California Alcohol And Drug Programs, Inc.	Downey	90706	Los Angeles	CDRF	5/30/2001	1,780,000	1,780,000
Tarzana Treatment Center, Tarzana	Tarzana Treatment Center, Inc.	Tarzana	91356	Los Angeles	CDRF	12/9/1998	1,950,000	1,870,000
The H. E. L. P. Group	H. E. L. P. Group, The	Sherman Oaks	91401	Los Angeles	GH-DD/MD	5/22/1998	17,275,000	16,480,000
The H. E. L. P. Group	H. E. L. P. Group, The	Sherman Oaks	91401	Los Angeles	GH-DD/MD	5/25/2000	17,620,000	17,620,000
Verdugo Mental Health Center	Verdugo Mental Health Center	Glendale	91205	Los Angeles	CLINIC-MH	12/16/1993	1,000,000	900,000
				Los Angeles		37	212,095,000	196,180,000
Madera Community Hospital	Madera Community Hospital	Madera	93637	Madera	HOSP	3/11/1993	10,200,000	6,280,000
				Madera		1	10,200,000	6,280,000
Aldersly, Inc.	Aldersly, Inc.	San Rafael	94901	Marin	MULTI-CCRC	5/29/1991	2,000,000	1,735,000
Community Church Retirement Center	Community Church Retirement Center (The Redwoods)	Mill Valley	94941	Marin	MULTI-OTH	3/11/1997	6,115,000	5,595,000
Henry Ohlhoff House	Henry Ohlhoff House	Novato	94949	Marin	CDRF	9/14/1990	1,000,000	860,000
				Marin		3	9,115,000	8,190,000
John C. Fremont Hospital District	John C. Fremont Hospital	Mariposa	95338	Mariposa	HOSP-DIST	10/11/1994	5,840,000	5,435,000
				Mariposa		1	5,840,000	5,435,000
Mendocino Coast Health Care District	Mendocino Coast Hospital	Fort Bragg	95437	Mendocino	HOSP-DIST	8/28/1996	4,030,000	3,585,000
				Mendocino		1	4,030,000	3,585,000
Golden Valley Health Centers	GVHC - Childs Avenue Clinic	Merced	95340	Merced	CLINIC-PC	1/28/1994	3,785,000	3,420,000
				Merced		1	7,140,000	5,775,000
Modoc County Medical Center	Modoc County Medical Center	Alturas	96101	Modoc	HOSP	6/28/1990	2,515,000	1,525,000
				Modoc		1	2,515,000	1,525,000
Clinica De Salud Del Valle De Salinas	Clinica De Salud Del Valle De Salinas Db	Salinas	93905	Monterey	CLINIC-PC	7/26/1989	580,000	485,000
Clinicas De Salud Del Valle De Salinas	Clinica De Salud Del Valle De Salinas	Salinas	93905	Monterey	CLINIC-PC	7/2/1992	1,450,000	1,305,000
Gateway Center	Gateway Center	Pacific Grove	93950	Monterey	GH-DD	5/11/1993	850,000	755,000
Interim, Inc.	Interim, Inc.	Monterey	93942	Monterey	GH-MD	6/24/1991	750,000	650,000
				Monterey		4	3,630,000	3,195,000
Aldea Inc.	Aldea, Inc.	Napa	94559	Napa	GH-MD	6/27/1990	495,000	430,000
California Odd Fellows Housing Of Napa, Inc.	Meadows, The	Napa	94559	Napa	MULTI-OTH	10/6/1993	18,995,000	17,515,000
				Napa		2	19,490,000	17,945,000

Borrower Name	Project Name	Borrower / Project City	ZIP	County	Facility Type	Insured Date	Original Insured Amount	Current Principal Balance
Canyon Acres Children's Services	Canyon Acres Children's Services	Anaheim	92817	Orange	GH-DD/MD	8/21/1991	975,000	845,000
Feedback Foundation, Inc.	Feedback Foundation	Anaheim	92801	Orange	ADHC	12/30/1992	2,140,000	1,899,320
Olive Crest Treatment Center.	Olive Crest Treatment Center	Santa Ana	92705	Orange	GH-MD	12/30/1992	2,280,000	2,025,562
Orange County A R C	Orange County A R C	Anaheim	92801	Orange	ADC-DD	11/17/1999	4,500,000	4,415,000
Southern California Alcohol & Drug Program	S C A D P - Heritage House	Downey	90241	Orange	CDRF	12/30/1992	1,315,000	1,168,242
United Cerebral Palsy	United Cerebral Palsy	Santa Ana	92704	Orange	ADHC	9/17/1993	760,000	690,000
				Orange		6	11,970,000	11,043,124
Desert Aids Project, Inc.	Desert Aids Project, Inc.	Palm Springs	92262	Riverside	CLINIC-AIDS	4/26/2001	3,570,000	3,570,000
Thessalonika Family Services	Thessalonika Family Services	Temecula	92589	Riverside	GH-DD/MD	12/19/1995	1,360,000	1,145,000
				Riverside		2	4,930,000	4,715,000
Asian Community Skilled Nursing Facility	Asian Community Skilled Nursing Facility	Sacramento	95831	Sacramento	SNF	10/14/1992	3,160,000	2,480,000
Catholic Healthcare West	Mercy McMahon Terrace	Sacramento	95816	Sacramento	MULTI-OTH	3/17/1993	9,360,000	7,540,000
Center For Aids Research, Education & Services	Center For Aids Research, Education & Services	Sacramento	95814	Sacramento	CLINIC-AIDS	4/30/1998	3,330,000	3,070,000
Sacramento Medical Foundation	Sacramento Medical Foundation Blood Bank	Sacramento	95816	Sacramento	BB	5/6/1998	14,460,000	13,310,000
				Sacramento		4	30,310,000	26,400,000
San Benito Health Foundation	San Benito Health Foundation	Hollister	95023	San Benito	CLINIC-PC	11/28/1990	2,485,000	2,170,000
				San Benito		1	2,485,000	2,170,000
Apple Valley Christian Centers	Apple Valley Retirement	Apple Valley	92308	San Bernardino	SNF	5/24/2001	9,525,000	9,525,000
Community Health System, Inc.	Community Health System, Inc.	Bloomington	92316	San Bernardino	CLINIC-PC	8/30/2000	1,295,000	1,295,000
Guadulpe Homes - Colton	Guadulpe Homes - Colton	Colton	92324	San Bernardino	GH-MD	12/26/1991	2,425,000	2,065,000
Guadulpe Homes - Colton	Guadulpe Homes - Colton	Colton	92324	San Bernardino	GH-MD	4/4/1994	1,380,000	785,000
Redlands Community Hospital	Redlands Community Hospital	Redlands	92373	San Bernardino	HOSP	3/17/1987	37,620,000	7,470,000
Redlands Community Hospital	Redlands Community Hospital	Redlands	92373	San Bernardino	HOSP	7/26/1990	3,997,148	2,867,148
Social Science Services, Inc.	Social Science Services, Inc.	Bloomington	92316	San Bernardino	CDRF	4/28/2000	1,970,000	1,970,000
Sunset Haven	Sunset Haven	Ontario	91762	San Bernardino	MULTI-OTH	8/28/1997	6,320,000	5,875,000
Victor Valley Community Hospital	Victor Valley Community Hospital - L O C	Victorville	92392	San Bernardino	HOSP	10/28/1999	3,000,000	2,307,372
Victor Valley Community Hospital	Victor Valley Community Hospital	Victorville	92392	San Bernardino	HOSP	5/26/2000	8,470,000	8,470,000
				San Bernardino		10	76,002,148	42,629,520
A R C - San Diego	A R C Of San Diego	San Diego	92123	San Diego	ICF-DD	7/23/1997	9,260,000	8,460,000
Casa De Las Campanas	Casa De Las Campana	San Diego	92127	San Diego	MULTI-CCRC	6/9/1998	45,340,000	42,585,000
Home Of The Guiding Hands Corporation	Home Of Guiding Hands Corporation	Lakeside	92040	San Diego	GH-DD/MD	8/2/1991	2,830,000	2,445,000
Mental Health Systems Inc.	Mental Health Systems, Inc.	San Diego	92131	San Diego	GH-MD	12/30/1992	650,000	575,000
North County Health Services Inc.	N C H S - San Marcos Community Health Clinic	San Marcos	92069	San Diego	CLINIC-PC	3/14/1996	5,500,000	5,015,000
Redwood Senior Homes & Services	Redwood Senior Homes & Services - Redwood Terrace	Escondido	92025	San Diego	MULTI-CCRC	7/16/1991	15,200,000	12,000,000
Redwood Senior Homes & Services	Redwood Senior Homes & Services - Redwood Town Cou	Escondido	92025	San Diego	MULTI-OTH	7/8/1997	6,120,000	5,715,000
Retirement Housing Foundation, Inc.	Poway R H F Housing, Inc. - The Gateway	Poway	92128	San Diego	MULTI-OTH	12/28/2000	19,375,000	19,375,000
San Diego Christian Foundation	San Diego Christian Foundation	San Diego	92117	San Diego	MULTI-OTH	8/4/1992	8,360,000	7,515,000
St.Paul's Episcopal Home, Inc.	St.Paul's Episcopal Home, Inc.	San Diego	92103	San Diego	MULTI-OTH	9/13/1994	7,140,000	5,775,000
				San Diego		11	119,775,000	109,460,000

Borrower Name	Project Name	Borrower / Project City	ZIP	County	Facility Type	Insured Date	Original Insured Amount	Current Principal Balance
Blood Centers Of The Pacific	Blood Centers Of The Pacific	San Francisco	94118	San Francisco	BB	12/17/1991	8,500,000	7,405,000
Burt Center, Inc.	Burt Center, Inc.	San Francisco	94117	San Francisco	GH-MD	4/18/2001	3,200,000	3,200,000
Milestones Human Services, Inc.	Milestones Human Services, Inc.	San Francisco	94103	San Francisco	CDRF	7/17/1997	2,795,000	2,665,000
Onlok Inc.	On Lok, Inc.	San Francisco	94109	San Francisco	MULTI-OTH	12/22/1992	13,300,000	12,140,000
Scott Street Senior Housing Complex, Inc.	Scott Street Senior Housing Complex	San Francisco	94115	San Francisco	MULTI-OTH	6/18/1998	37,770,000	37,770,000
St.Luke's Hospital	St.Luke's Hospital	San Francisco	94110	San Francisco	HOSP	7/15/1997	9,815,000	8,600,000
Walden House Inc.	Walden House - L O C	San Francisco	94103	San Francisco	CDRF	6/27/2000	3,000,000	2,975,000
Walden House, Inc.	Walden House, Inc.	San Francisco	94103	San Francisco	CDRF	3/24/1992	8,800,000	7,705,000
San Francisco						8	87,180,000	82,460,000
Community Medical Center, Inc.	Community Medical Centers, Inc.	Stockton	95202	San Joaquin	CLINIC-PC	10/12/1994	3,050,000	2,850,000
Lodi Memorial Hospital Association, Inc.	Lodi Memorial Hospital Association, Inc.	Lodi	94251	San Joaquin	HOSP	10/26/2000	12,570,000	12,570,000
San Joaquin						2	15,620,000	15,420,000
Atascadero Committee For Education	Escuela Del Rio	Atascadero	93423	San Luis Obispo	ADC-DD	9/4/1991	190,000	140,000
Central Coast Neurobehavior Center, Inc.	Central Coast Neurobehavior Center, Inc.	Morro Bay	93443	San Luis Obispo	ADC-DD	8/17/1989	410,000	340,000
Community Health Centers Of The Central Coast, Inc.	Community Health Centers Of The Central Coast, Inc.	Nipomo	93444	San Luis Obispo	CLINIC-PC	7/17/1990	770,000	655,000
San Luis Obispo						3	1,370,000	1,135,000
Isla Vista Community Clinic	Isla Vista Open Door Medical Clinic	Isla Vista	93117	Santa Barbara	CLINIC-PC	7/7/1988	450,000	365,000
Montecito Retirement Association	Casa Dorinda	Montecito	93108	Santa Barbara	MULTI-CCRC	7/13/1993	19,430,000	15,830,000
Lompoc Distric Hospital	Lompoc District Hospital	Lompoc	93438	Santa Barbara	HOSP-DIST	9/23/1998	6,375,000	5,955,000
Sanctuary Psychiatric Centers Of Santa Barbara	Sanctuary Psychiatric Centers Of Santa Barbara	Santa Barbara	93102	Santa Barbara	GH-MD	1/16/1991	810,000	705,000
Sansum Santa Barbara Medical Foundation Clinic	Santa Barbara Medical Foundation	Goleta	93111	Santa Barbara	CLINIC-PC	8/8/1989	15,000,000	12,570,000
Solvang Lutheran Home	Solvang Lutheran Home	Solvang	93463	Santa Barbara	MULTI-CCRC	8/27/1996	5,210,000	4,590,000
Santa Barbara						6	47,275,000	40,015,000
Achieve	Achieve	Palo Alto	94303	Santa Clara	GH-DD/MD	7/8/1991	385,000	340,000
Advent Group Ministries, Inc	Advent Group Ministries	San Jose	95119	Santa Clara	GH-MD	2/28/1991	1,025,000	895,000
Alliance For Community Care	Alliance For Community Care - Miramonte	San Jose	95127	Santa Clara	CLINIC-MH	12/23/1992	2,600,000	2,335,000
Alliance For Community Care	Alliance For Community Care - Avenues	San Jose	95127	Santa Clara	GH-MD	10/8/1992	7,500,000	6,625,000
Asian Americans For Community Involvement For Santa	Asian Americans For Community Involvement	San Jose	95128	Santa Clara	CLINIC-MH	10/28/1992	4,800,000	4,300,000
Eastfield Ming Quong	Eastfield Ming Quong - Giarretto Institute	San Jose	95112	Santa Clara	CLINIC-MH	10/2/1992	1,040,000	935,000
Eastfield Ming Quong	Eastfield Ming Quong, Inc.	Campbell	95008	Santa Clara	GH-MD	3/11/1997	7,025,000	6,280,000
Gardner Family Health Network	Gardner Family Care Corporation	San Jose	95112	Santa Clara	CLINIC-PC	7/26/1989	1,670,000	605,000
Gardner Family Health Network	Gardner Family Health Network	San Jose	95112	Santa Clara	CLINIC-PC	8/30/1995	5,000,000	4,400,000
Hope Rehabilitation Service	Hope Rehabilitation Service	Santa Clara	95054	Santa Clara	ADC-DD	11/20/1990	6,500,000	5,550,000
Lincoln Glen Manor For Senior Citizens	Lincoln Glen Manor	San Jose	95125	Santa Clara	MULTI-OTH	3/9/2000	7,500,000	7,500,000
Lytton Gardens, Inc.	Lytton Gardens Healthcare Center	Palo Alto	94301	Santa Clara	SNF	12/9/1999	16,355,000	16,345,000
Mexican American Community Service Agency	Mexican American Community Services Agency	San Jose	95116	Santa Clara	ADHC	9/26/1989	1,480,000	1,250,000
Odd Fellows Home of California	Saratoga Retirement Community	Saratoga	95070	Santa Clara	MULTI-OTH	10/14/1999	34,500,000	34,500,000
Sunny View Lutheran Home	Sunny View Lutheran Home	Cupertino	95014	Santa Clara	MULTI-CCRC	9/17/1997	4,430,000	3,975,000
Sunny View Lutheran Home	Sunny View Lutheran Home	Cupertino	95014	Santa Clara	MULTI-CCRC	2/25/1999	5,685,000	5,555,000
Santa Clara						16	107,495,000	101,390,000

Borrower Name	Project Name	Borrower / Project City	ZIP	County	Facility Type	Insured Date	Original Insured Amount	Current Principal Balance
Janus Of Santa Cruz	Janus Of Santa Cruz	Santa Cruz	95062	Santa Cruz	CDRF	3/24/1993	1,000,000	870,000
Salud Para La Gente	Salud Para La Gente	Watsonville	95096	Santa Cruz	CLINIC-PC	4/28/2000	2,285,000	2,285,000
				Santa Cruz		2	3,285,000	3,155,000
Mayers Memorial Hospital District	Mayers Memorial Hospital District	Fall River Mills	96028	Shasta	HOSP-DIST	1/27/1994	9,220,000	7,465,000
				Shasta		1	9,220,000	7,465,000
Butte Valley - Tulelake Rural Health Projects Inc.	Butte Valley - Tulelake Rural Health Project.	Dorris	96023	Siskiyou	CLINIC-PC	10/28/1992	1,000,000	1,000,000
				Siskiyou		1	1,000,000	1,000,000
Becoming Independent	Becoming Independent	Santa Rosa	95403	Sonoma	ADC-DD	2/29/1996	1,665,000	1,475,000
Drug Abuse Alternatives Center	Drug Abuse Alternatives Center	Santa Rosa	95403	Sonoma	CDRF	11/18/1993	1,825,000	1,655,000
Friends Association Of Services For The Elderly	Friends House	Santa Rosa	95409	Sonoma	MULTI-OTH	10/14/1992	1,140,000	470,000
Friends Association Of Services For The Elderly	Friends House	Santa Rosa	95409	Sonoma	MULTI-OTH	8/12/1993	2,000,000	1,830,000
Sonoma Valley Hospital District	Sonoma Valley Hospital District - A & B	Sonoma	95476	Sonoma	HOSP-DIST	12/13/1984	12,445,000	2,605,000
Sonoma Valley Hospital District	Sonoma Valley Hospital District	Sonoma	95476	Sonoma	HOSP-DIST	2/11/1987	8,940,000	6,630,000
True To Life Children's Services	True To Life Children's Services	Sebastopol	95473	Sonoma	GH-MD	9/17/1997	1,700,000	1,585,000
True To Life Children's Services	True To Life Children's Services	Sebastopol	95473	Sonoma	GH-DD/MD	10/17/2000	2,400,000	2,400,000
				Sonoma		8	32,115,000	18,650,000
Fellowship Homes, Inc.	Casa De Modesto	Modesto	95350	Stanislaus	MULTI-OTH	8/27/1996	6,065,000	5,475,000
Golden Valley Health Centers	Gvhc-West Modesto Medical Clinic	Modesto	95430	Stanislaus	CLINIC-PC	10/30/1990	445,000	390,000
				Stanislaus		2	6,510,000	5,865,000
Tulare Local Healthcare District	Tulare Local Healthcare District	Tulare	93274	Tulare	HOSP-DIST	12/4/1998	12,920,000	12,230,000
				Tulare		1	12,920,000	12,230,000
Clinicas Del Camino Real, Incorporated	Clinicas Del Camino Real	Ventura	93004	Ventura	CLINIC-PC	3/13/1990	2,800,000	2,390,000
Clinicas Del Camino Real, Incorporated	Clinicas Del Camino Real	Oxnard	93030	Ventura	CLINIC-PC	11/15/1993	550,000	495,000
Clinicas Del Camino Real, Incorporated	Clinicas Del Camino Real - Satcoy Family Health Care Ce	Ventura	93004	Ventura	CLINIC-PC	5/24/1995	7,225,000	6,690,000
				Ventura		3	10,575,000	9,575,000
Families First, Inc.	Families First	Davis	95616	Yolo	GH-DD/MD	3/15/2000	17,600,000	17,600,000
				Yolo		1	17,600,000	17,600,000
Del Norte Clinics, Inc.	Del Norte Clinics, Inc., Lindhurst	Olivehurst	95961	Yuba	CLINIC-PC	5/28/1993	1,285,000	1,145,000
				Yuba		1	1,285,000	1,145,000

Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division
Insured Projects by Size of Insured Loan Amount

(sorted by Original Insured Amount)

as of June 30, 2001

Borrower Name	Borrower City	Date Loan Insured	Original Insured Amount	Current Principal Balance	Facility Type
Henry Mayo Newhall Memorial Hospital	Valencia	2/21/2001	\$54,895,000	\$54,895,000	HOSP
Casa De Las Campanas	San Diego	6/9/1998	\$45,340,000	\$42,585,000	MULTI-CCRC
El Centro Regional Medical Center	El Centro	4/26/2001	\$39,300,000	\$39,300,000	HOSP
Scott Street Senior Housing Complex, Inc.	San Francisco	6/18/1998	\$37,770,000	\$37,770,000	MULTI-OTH
Redlands Community Hospital	Redlands	3/17/1987	\$37,620,000	\$7,470,000	HOSP
V C H S - Valleycare Hospital Corporation	Pleasanton	7/22/1997	\$37,165,000	\$33,350,000	HOSP
Odd Fellows Home Of California	Saratoga	10/14/1999	\$34,500,000	\$34,500,000	MULTI-OTH
Marshall Hospital	Placerville	5/13/1998	\$28,030,000	\$26,415,000	HOSP
Oroville Hospital	Oroville	10/15/1997	\$27,670,000	\$25,775,000	HOSP
Eden Hospital Health Services Corp.	Castro Valley	7/29/1993	\$23,675,000	\$19,855,000	MULTI-OTH
Kern Valley Healthcare District	Mountain Mesa	2/15/1991	\$20,590,000	\$17,770,000	HOSP-DIST
Loan Size: Greater Than \$20,000,000		11	\$386,555,000	\$339,685,000	
Marshall Hospital	Placerville	10/6/1993	\$19,975,000	\$15,230,000	HOSP
Montecito Retirement Association	Montecito	7/13/1993	\$19,430,000	\$15,830,000	MULTI-CCRC
Retirement Housing Foundation, Inc.	Long Beach	12/28/2000	\$19,375,000	\$19,375,000	MULTI-OTH
California Odd Fellows Housing Of Napa, Inc.	Napa	10/6/1993	\$18,995,000	\$17,515,000	MULTI-OTH
The H. E. L. P. Group	Sherman Oaks	5/25/2000	\$17,620,000	\$17,620,000	GH-DD/MD
Families First, Inc.	Davis	3/15/2000	\$17,600,000	\$17,600,000	GH-DD/MD
The H. E. L. P. Group	Sherman Oaks	5/22/1998	\$17,275,000	\$16,480,000	GH-DD/MD
Lytton Gardens, Inc.	Palo Alto	12/9/1999	\$16,355,000	\$16,345,000	SNF
Redwood Senior Homes & Services	Glendale	7/16/1991	\$15,200,000	\$12,000,000	MULTI-CCRC
Sansum Santa Barbara Medical Foundation Clinic	Goleta	8/8/1989	\$15,000,000	\$12,570,000	CLINIC-PC
Walker Senior Housing Corporation V I I - The Lodge	Chico	3/1/1991	\$15,000,000	\$12,965,000	MULTI-OTH
Sacramento Medical Foundation	Sacramento	5/6/1998	\$14,460,000	\$13,310,000	BB
Onlok Inc.	San Francisco	12/22/1992	\$13,300,000	\$12,140,000	MULTI-OTH
Tulare Local Healthcare District	Tulare	12/4/1998	\$12,920,000	\$12,230,000	HOSP-DIST
Lodi Memorial Hospital Association, Inc.	Lodi	10/26/2000	\$12,570,000	\$12,570,000	HOSP
Home For Jewish Parents	Danville	7/9/1997	\$12,555,000	\$11,940,000	MULTI-OTH
Sonoma Valley Hospital District	Sonoma	12/13/1984	\$12,445,000	\$2,605,000	HOSP-DIST
V C H S - Valley Memorial Hospital	Pleasanton	7/7/1993	\$11,660,000	\$10,030,000	HOSP
Atherton Baptist Homes	Alhambra	2/5/1987	\$11,470,000	\$8,530,000	MULTI-CCRC
Behavioral Health Services	Gardena	11/7/1996	\$10,845,000	\$9,825,000	CDRF
Keiro Nursing Home	Los Angeles	3/10/1994	\$10,675,000	\$8,995,000	SNF
Madera Community Hospital	Madera	3/11/1993	\$10,200,000	\$6,280,000	HOSP
Loan Size: Between \$10,000,000 - \$19,999,999		22	\$324,925,000	\$281,985,000	

Borrower Name	Borrower City	Date Loan Insured	Original Insured Amount	Current Principal Balance	Facility Type
St. Luke'S Hospital - S. F.	San Francisco	7/15/1997	\$9,815,000	\$8,600,000	HOSP
Apple Valley Christian Centers	Apple Valley	5/24/2001	\$9,525,000	\$9,525,000	SNF
Catholic Healthcare West	San Francisco	3/17/1993	\$9,360,000	\$7,540,000	MULTI-OTH
A R C - San Diego	San Diego	7/23/1997	\$9,260,000	\$8,460,000	ICF-DD
Mayers Memorial Hospital District	Fall River Mills	1/27/1994	\$9,220,000	\$7,465,000	HOSP-DIST
Sonoma Valley Hospital District	Sonoma	2/11/1987	\$8,940,000	\$6,630,000	HOSP-DIST
Walden House, Inc.	San Francisco	3/24/1992	\$8,800,000	\$7,705,000	CDRF
Blood Centers Of The Pacific	San Francisco	12/17/1991	\$8,500,000	\$7,405,000	BB
V C H S - Valleycare Hospital Corporation	Pleasanton	5/6/1992	\$8,500,000	\$6,205,000	HOSP
Victor Valley Community Hospital	Victorville	5/26/2000	\$8,470,000	\$8,470,000	HOSP
San Diego Christian Foundation	San Diego	8/4/1992	\$8,360,000	\$7,515,000	MULTI-OTH
Solheim Lutheran Home	Los Angeles	6/23/1994	\$8,230,000	\$6,975,000	MULTI-CCRC
Alliance For Community Care	San Jose	10/8/1992	\$7,500,000	\$6,625,000	GH-MD
Lincoln Glen Manor For Senior Citizens	San Jose	3/9/2000	\$7,500,000	\$7,500,000	MULTI-OTH
Clinicas Del Camino Real, Incorporated	Ventura	5/24/1995	\$7,225,000	\$6,690,000	CLINIC-PC
St. Paul'S Episcopal Home, Inc.	San Diego	9/13/1994	\$7,140,000	\$5,775,000	MULTI-OTH
Eastfield Ming Quong	Campbell	3/11/1997	\$7,025,000	\$6,280,000	GH-MD
Hope Rehabilitation Service	Santa Clara	11/20/1990	\$6,500,000	\$5,550,000	ADC-DD
Asian Health Services	Oakland	11/21/1995	\$6,500,000	\$5,885,000	CLINIC-PC
Ararat Home Of Los Angeles	Mission Hills	4/29/1998	\$6,460,000	\$5,955,000	MULTI-OTH
Lompoc District Hospital	Lompoc	9/23/1998	\$6,375,000	\$5,955,000	HOSP-DIST
Sunset Haven	Ontario	8/28/1997	\$6,320,000	\$5,875,000	MULTI-OTH
Redwood Senior Homes & Services	Glendale	7/8/1997	\$6,120,000	\$5,715,000	MULTI-OTH
Community Church Retirement Center	Mill Valley	3/11/1997	\$6,115,000	\$5,595,000	MULTI-OTH
Fellowship Homes, Inc.	Modesto	8/27/1996	\$6,065,000	\$5,475,000	MULTI-OTH
Aids Healthcare Foundation	Los Angeles	10/22/1992	\$5,855,000	\$4,770,000	HOSPICE
John C. Fremont Hospital District	Mariposa	10/11/1994	\$5,840,000	\$5,435,000	HOSP-DIST
Sunny View Lutheran Home	Cupertino	2/25/1999	\$5,685,000	\$5,555,000	MULTI-CCRC
Children'S Institute International.	Los Angeles	2/27/1992	\$5,635,000	\$5,015,000	GH-MD
North County Health Services Inc.	San Marcos	3/14/1996	\$5,500,000	\$5,015,000	CLINIC-PC
Pacific Clinics	Arcadia	6/2/1988	\$5,455,000	\$4,540,000	CLINIC-MH
Walker Senior Housing Corporation V I I - The Lodge	Chico	11/17/1993	\$5,270,000	\$4,795,000	MULTI-OTH
Altamed Health Services	Commerce	4/28/2000	\$5,250,000	\$5,250,000	CLINIC-PC
Solvang Lutheran Home	Solvang	8/27/1996	\$5,210,000	\$4,590,000	MULTI-CCRC
Gardner Family Health Network	San Jose	8/30/1995	\$5,000,000	\$4,400,000	CLINIC-PC
West Contra Costa Healthcare District	Richmond	1/24/1997	\$5,000,000	\$3,656,588	HOSP
Loan Size: Between \$5,000,000 - \$9,999,999		36	\$253,525,000	\$224,391,588	
Asian Americans For Community Involvement For Santa Clara	San Jose	10/28/1992	\$4,800,000	\$4,300,000	CLINIC-MH
California Autism Foundation Inc.	Richmond	11/8/1995	\$4,700,000	\$4,195,000	GH-DD/MD
El Proyecto Del Barrio	Arleta	12/16/1997	\$4,575,000	\$4,370,000	CLINIC-PC

Borrower Name	Borrower City	Date Loan Insured	Original Insured Amount	Current Principal Balance	Facility Type
Orange County A R C	Anaheim	11/17/1999	\$4,500,000	\$4,415,000	ADC-DD
Sunny View Lutheran Home	Cupertino	9/17/1997	\$4,430,000	\$3,975,000	MULTI-CCRC
Sierra View Homes	Reedley	12/18/1996	\$4,425,000	\$3,995,000	MULTI-OTH
Prototypes	Culver City	6/27/2001	\$4,195,000	\$4,195,000	CDRF
Southern California Alcohol & Drug Program	Downey	12/18/1997	\$4,095,000	\$3,840,000	CDRF
Mendocino Coast Health Care District	Fort Bragg	8/28/1996	\$4,030,000	\$3,585,000	HOSP-DIST
Redlands Community Hospital	Redlands	7/26/1990	\$3,997,148	\$2,867,148	HOSP
Golden Valley Health Centers	Merced	1/28/1994	\$3,785,000	\$3,420,000	CLINIC-PC
San Fernando Valley Community Mental Health Center	Van Nuys	6/26/1998	\$3,700,000	\$3,455,000	ADHC
Desert Aids Project, Inc.	Palm Springs	4/26/2001	\$3,570,000	\$3,570,000	CLINIC-AIDS
Southern Calif. Development Corp. Of V O A, Inc.	La Mesa	1/12/1996	\$3,500,000	\$3,010,000	GH-DD/MD
Center For Aids Research, Education & Services	Sacramento	4/30/1998	\$3,330,000	\$3,070,000	CLINIC-AIDS
Aids Healthcare Foundation	Los Angeles	11/10/1994	\$3,300,000	\$3,040,000	HOSPICE
Clinicas De Salud Del Pueblo	Brawley	6/26/1998	\$3,250,000	\$3,095,000	CLINIC-PC
Burt Center, Inc.	San Francisco	4/18/2001	\$3,200,000	\$3,200,000	GH-MD
Asian Community Skilled Nursing Facility	Sacramento	10/14/1992	\$3,160,000	\$2,480,000	SNF
Community Medical Center, Inc.	Stockton	10/12/1994	\$3,050,000	\$2,850,000	CLINIC-PC
Walden House Inc.	San Francisco	6/27/2000	\$3,000,000	\$2,975,000	CDRF
Victor Valley Community Hospital	Victorville	10/28/1999	\$3,000,000	\$2,307,372	HOSP
Exceptional Children'S Foundation	Los Angeles	9/27/1995	\$2,990,000	\$2,610,000	GH-DD/MD
Lifelong Medical Care, Incorporated	Berkeley	12/14/1998	\$2,970,000	\$2,970,000	CLINIC-PC
Lincoln Child Center, Inc.	Oakland	11/23/1999	\$2,900,000	\$2,900,000	GH-MD
Home Of The Guiding Hands Corporation	Lakeside	8/2/1991	\$2,830,000	\$2,445,000	GH-DD/MD
Clinicas Del Camino Real, Incorporated	Ventura	3/13/1990	\$2,800,000	\$2,390,000	CLINIC-PC
Milestones Human Services, Inc.	San Francisco	7/17/1997	\$2,795,000	\$2,665,000	CDRF
Alliance For Community Care	San Jose	12/23/1992	\$2,600,000	\$2,335,000	CLINIC-MH
Prototypes	Culver City	6/23/1993	\$2,530,000	\$1,950,000	CDRF
Modoc County Medical Center	Alturas	6/28/1990	\$2,515,000	\$1,525,000	HOSP
West Oakland Health Council, Inc.	Oakland	10/24/1990	\$2,500,000	\$2,225,000	CLINIC-PC
Oroville Hospital	Oroville	11/8/2000	\$2,500,000	\$1,655,135	HOSP
San Benito Health Foundation	Hollister	11/28/1990	\$2,485,000	\$2,170,000	CLINIC-PC
Sequoia Community Health Foundation	Fresno	11/18/1993	\$2,430,000	\$2,205,000	CLINIC-PC
Guadalupe Homes - Colton	Colton	12/26/1991	\$2,425,000	\$2,065,000	GH-MD
True To Life Children'S Services	Sebastopol	10/17/2000	\$2,400,000	\$2,400,000	GH-DD/MD
Salud Para La Gente	Watsonville	4/28/2000	\$2,285,000	\$2,285,000	CLINIC-PC
Beacon House	San Pedro	12/8/1993	\$2,280,000	\$2,045,000	CDRF
Olive Crest Treatment Center.	Santa Ana	12/30/1992	\$2,280,000	\$2,025,562	GH-MD
Principles Inc.	Pasadena	8/22/1991	\$2,245,000	\$1,995,000	CDRF
Feedback Foundation, Inc.	Anaheim	12/30/1992	\$2,140,000	\$1,899,320	ADHC
El Proyecto Del Barrio	Arlita	12/4/1990	\$2,040,000	\$1,735,000	CLINIC-PC
Sherman Oaks Health System	Sherman Oaks	12/17/1999	\$2,000,000	\$1,900,000	HOSP
Kern Valley Healthcare District	Mountain Mesa	6/23/2000	\$2,000,000	\$1,130,991	HOSP-DIST

Borrower Name	Borrower City	Date Loan Insured	Original Insured Amount	Current Principal Balance	Facility Type
Aids Healthcare Foundation	Los Angeles	5/17/2001	\$2,000,000	\$975,000	HOSPICE
Aldersly, Inc.	San Rafael	5/29/1991	\$2,000,000	\$1,735,000	MULTI-CCRC
Friends Association Of Services For The Elderly	Santa Rosa	8/12/1993	\$2,000,000	\$1,830,000	MULTI-OTH
Social Science Services, Inc.	Bloomington	4/28/2000	\$1,970,000	\$1,970,000	CDRF
Tarzana Treatment Center, Tarzana	Tarzana	12/9/1998	\$1,950,000	\$1,870,000	CDRF
Clare Foundation	Santa Monica	8/22/1991	\$1,930,000	\$1,715,000	CDRF
Sequoia Community Health Foundation	Fresno	4/28/2000	\$1,905,000	\$1,905,000	CLINIC-PC
Social Model Recovery Systems, Inc.	Covina	6/27/2001	\$1,890,000	\$1,890,000	CDRF
Drug Abuse Alternatives Center	Santa Rosa	11/18/1993	\$1,825,000	\$1,655,000	CDRF
Southern California Alcohol And Drug Programs, Inc.	Downey	5/30/2001	\$1,780,000	\$1,780,000	CDRF
Clinicas De Salud Del Pueblo	Brawley	7/2/1992	\$1,720,000	\$1,545,000	CLINIC-PC
True To Life Children'S Services	Sebastopol	9/17/1997	\$1,700,000	\$1,585,000	GH-MD
Gardner Family Health Network	San Jose	7/26/1989	\$1,670,000	\$605,000	CLINIC-PC
Becoming Independent	Santa Rosa	2/29/1996	\$1,665,000	\$1,475,000	ADC-DD
Corcoran District Hospital	Corcoran	7/23/1992	\$1,555,000	\$1,180,000	HOSP-DIST
Los Angeles Centers For Alcohol & Drug Abuse	Santa Fe Springs	1/29/1997	\$1,515,000	\$1,405,000	CDRF
Mexican American Community Service Agency	San Jose	9/26/1989	\$1,480,000	\$1,250,000	ADHC
St. Luke Manor	Fortuna	12/10/1991	\$1,480,000	\$1,080,000	SNF
Clinicas De Salud Del Valle De Salinas	Salinas	7/2/1992	\$1,450,000	\$1,305,000	CLINIC-PC
Henrietta Weill Memorial	Bakersfield	10/14/1992	\$1,445,000	\$1,075,000	CLINIC-MH
Bi - Bett Corporation	Concord	3/28/1991	\$1,400,000	\$600,000	CDRF
Guadalupe Homes - Colton	Colton	4/4/1994	\$1,380,000	\$785,000	GH-MD
Thessalonika Family Services	Temecula	12/19/1995	\$1,360,000	\$1,145,000	GH-DD/MD
Southern California Alcohol & Drug Program	Downey	12/30/1992	\$1,315,000	\$1,168,242	CDRF
Community Health System, Inc.	Bloomington	8/30/2000	\$1,295,000	\$1,295,000	CLINIC-PC
National Council On Alcoh. & Drug Depend. Of The South Bay	Torrance	3/24/1993	\$1,290,000	\$1,130,000	CDRF
Del Norte Clinics, Inc.	Yuba City	5/28/1993	\$1,285,000	\$1,145,000	CLINIC-PC
Redwoods Rural Health Center, Inc.	Redway	3/13/1990	\$1,250,000	\$1,065,000	CLINIC-PC
Childnet Youth And Family Services, Inc.	Long Beach	4/12/1993	\$1,200,000	\$1,070,000	GH-MD
Humboldt Open Door Clinic	Arcata	4/28/2000	\$1,195,000	\$1,195,000	CLINIC-PC
Midvalley Recovery Services	El Monte	1/25/1991	\$1,175,000	\$1,015,000	CDRF
Horizon Services	Hayward	9/28/1992	\$1,140,000	\$1,025,000	CDRF
Friends Association Of Services For The Elderly	Santa Rosa	10/14/1992	\$1,140,000	\$470,000	MULTI-OTH
Del Norte Clinics, Inc.	Yuba City	4/28/2000	\$1,105,000	\$1,105,000	CLINIC-PC
Central Valley Indian Health, Inc.	Clovis	4/28/2000	\$1,055,000	\$1,055,000	CLINIC-PC
Eastfield Ming Quong	Campbell	10/2/1992	\$1,040,000	\$935,000	CLINIC-MH
Valley Health Team, Inc.	San Joaquin	3/13/1990	\$1,025,000	\$870,000	CLINIC-PC
Advent Group Ministries, Inc	San Jose	2/28/1991	\$1,025,000	\$895,000	GH-MD
Henry Ohlhoff House	San Francisco	9/14/1990	\$1,000,000	\$860,000	CDRF
Janus Of Santa Cruz	Santa Cruz	3/24/1993	\$1,000,000	\$870,000	CDRF
Verdugo Mental Health Center	Glendale	12/16/1993	\$1,000,000	\$900,000	CLINIC-MH
Butte Valley - Tulelake Rural Health Projects Inc.	Dorris	10/28/1992	\$1,000,000	\$895,000	CLINIC-PC

Borrower Name	Borrower City	Date Loan Insured	Original Insured Amount	Current Principal Balance	Facility Type
Loan Size: Between \$1,000,000 - \$4,999,999		87	\$201,137,148	\$177,058,770	
Canyon Acres Children'S Services	Anaheim	8/21/1991	\$975,000	\$845,000	GH-DD/MD
United Health Center Of The San Joaquin Valley, Inc.	Parlier	4/28/2000	\$950,000	\$950,000	CLINIC-PC
Social Model Recovery Systems, Inc.	Covina	3/19/1993	\$935,000	\$835,000	CDRF
Big Valley Medical Center	Bieber	3/24/1993	\$900,000	\$711,655	CLINIC-PC
Gateway Center	Pacific Grove	5/11/1993	\$850,000	\$755,000	GH-DD
Sanctuary Psychiatric Centers Of Santa Barbara	Santa Barbara	1/16/1991	\$810,000	\$705,000	GH-MD
Southern California Alcohol & Drug Program	Downey	6/11/1993	\$775,000	\$700,000	CDRF
Community Health Centers Of The Central Coast, Inc.	Nipomo	7/17/1990	\$770,000	\$655,000	CLINIC-PC
United Cerebral Palsy	Santa Ana	9/17/1993	\$760,000	\$690,000	ADHC
Interim, Inc.	Monterey	6/24/1991	\$750,000	\$650,000	GH-MD
Airport Marina Counseling Services	Westchester	9/27/1995	\$735,000	\$645,000	CLINIC-MH
Mental Health Systems Inc.	San Diego	12/30/1992	\$650,000	\$575,000	GH-MD
Northcountry Clinic	Arcata	7/7/1988	\$585,000	\$475,000	CLINIC-PC
Clinica De Salud Del Valle De Salinas	Salinas	7/26/1989	\$580,000	\$485,000	CLINIC-PC
Clinicas Del Camino Real, Incorporated	Ventura	11/15/1993	\$550,000	\$495,000	CLINIC-PC
Innovative Health Care Services	Chico	12/18/1990	\$540,000	\$435,000	ADHC
Aldea Inc.	Napa	6/27/1990	\$495,000	\$430,000	GH-MD
Isla Vista Community Clinic	Isla Vista	7/7/1988	\$450,000	\$365,000	CLINIC-PC
Golden Valley Health Centers	Merced	10/30/1990	\$445,000	\$390,000	CLINIC-PC
Central Coast Neurobehavior Center, Inc.	Morro Bay	8/17/1989	\$410,000	\$340,000	ADC-DD
Achieve	Palo Alto	7/8/1991	\$385,000	\$340,000	GH-DD/MD
Seneca Residential And Day Treatment Center	San Leandro	7/13/1990	\$320,000	\$170,000	GH-MD
Jeffrey Foundation	Los Angeles	12/18/1992	\$305,000	\$265,000	CDRF
Redwoods Rural Health Center, Inc.	Redway	5/19/1999	\$200,000	\$197,812	CLINIC-PC
Atascadero Committee For Education	Atascadero	9/4/1991	\$190,000	\$140,000	ADC-DD
Desarrollo Familiar	Richmond	12/23/1986	\$150,000	\$115,000	CLINIC-MH
Loan Size: Less than \$1,000,000		26	\$15,465,000	\$13,359,467	

Totals	182	\$1,181,607,148	\$1,036,479,826
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ADC: DD - Adult Day Care: Developmentally Disabled

ADHC - Adult Day Health Care

BB - Blood Banks

CDRF - Chemical Dependency Recovery Facility

CDC: DD - Child Day Care: Deveopmentally Disabled

Clinic: AIDS - Clinic: A.I.D.S.

Clinic: MH - Clinic: Mental Health

Clinic: PC - Clinic: Primary Care

GH: DD - Group Home: Developmentally Disabled

GH: DD & MD - Group Home: Developmentally Disabled and Mentally Disabled or Emotionally Distrubed

GH: MD - Group Home: Mentally Disabled or Emotionally Disturbed

Hosp: Dist - Hospital: District

Hosp - Hospital: General Acute Care

ICF: DD - Intermediate Care Facility: Developmentally Disabled

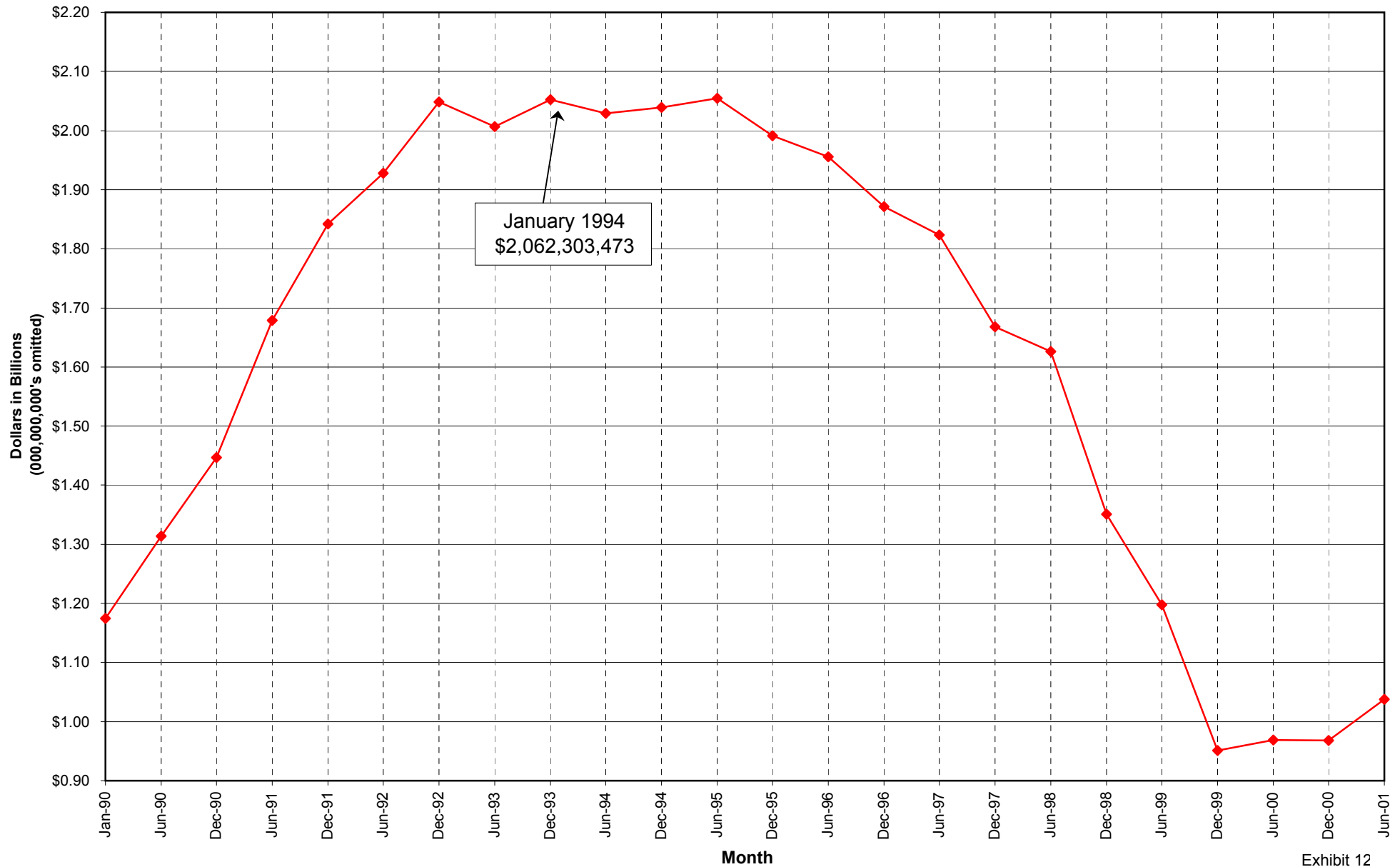
Multi: CCRC - Multi-level Facility: CCRC

Multi: Other - Multi-level Facility: Other (Month-to-Month)

SNF - Skilled Nursing Facility: Stand Alone

Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division
Portfolio / Insured Risk

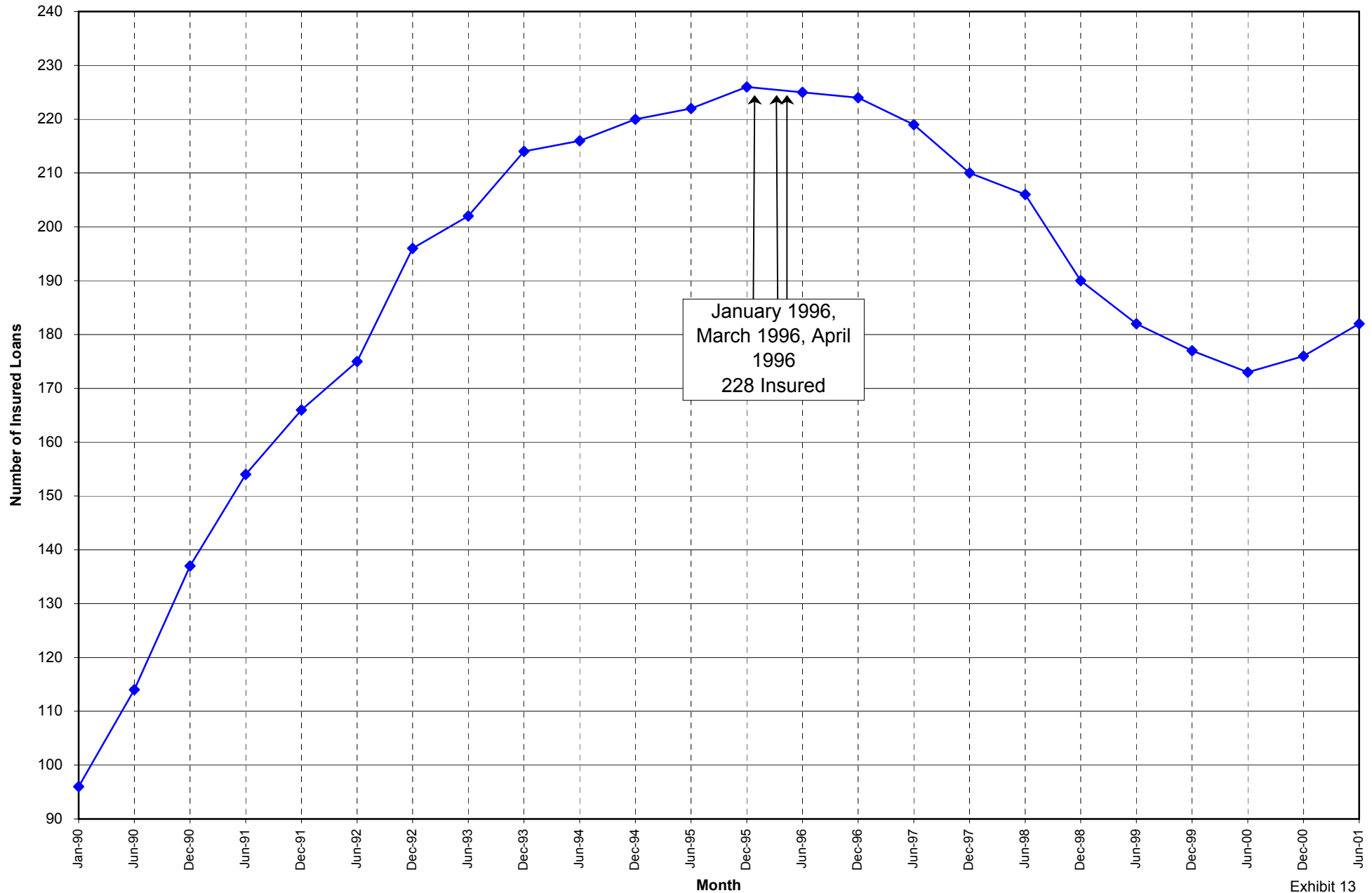
January 1990 through June 2001
(Maximum Risk Allowed By State Law is \$3 Billion)



Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division

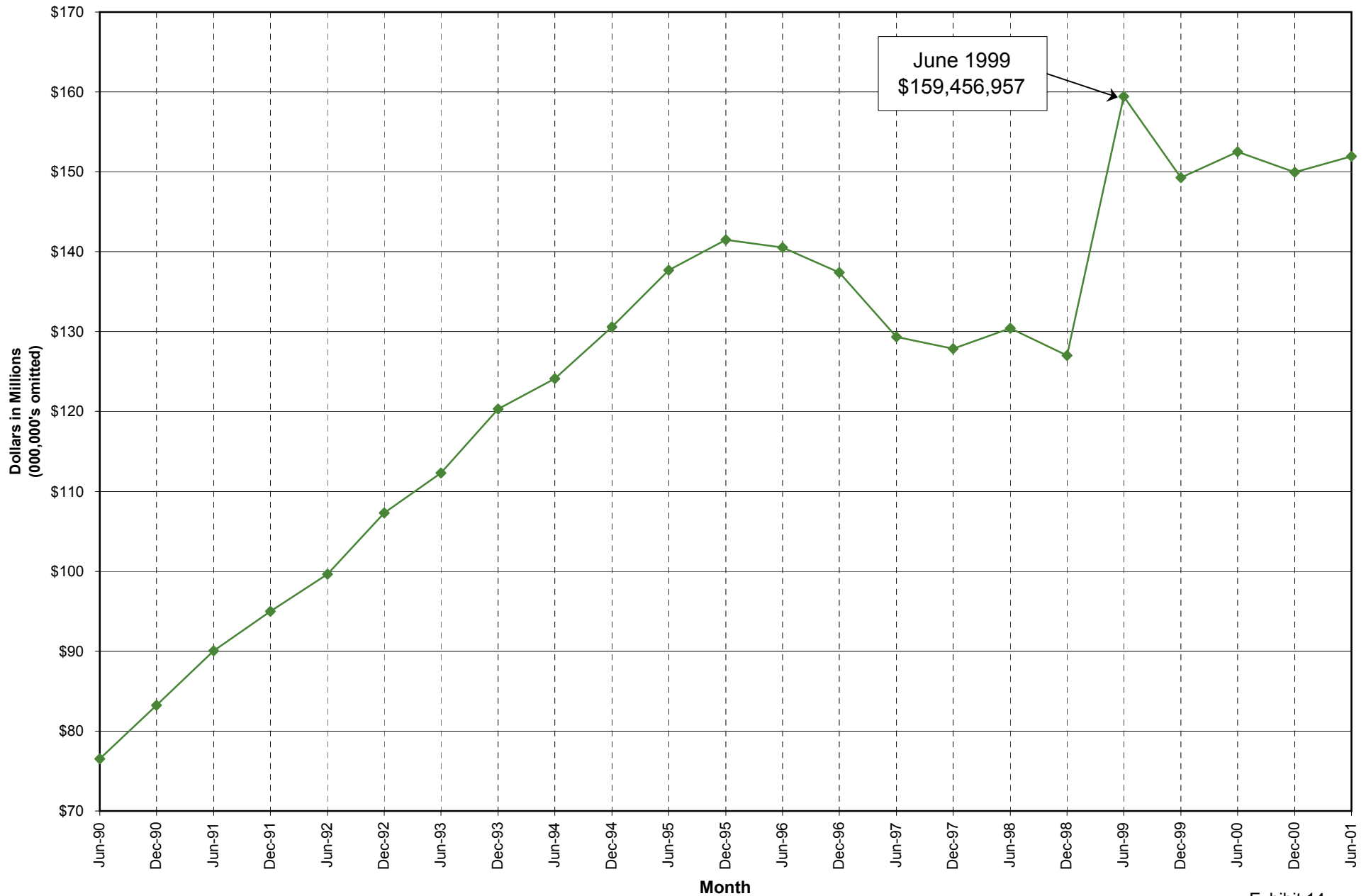
Number of Insured Loans

January 1990 through June 2001



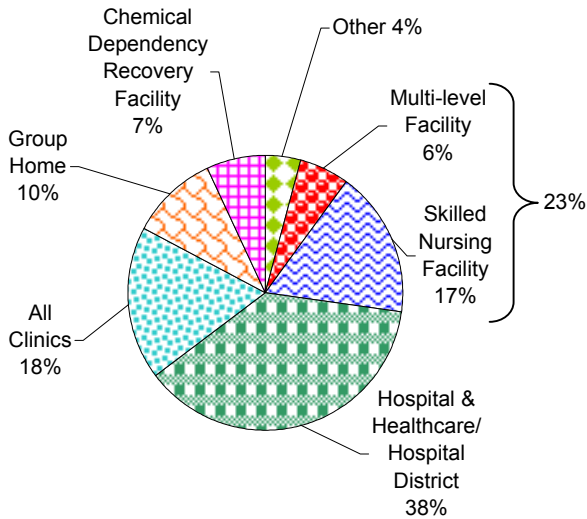
Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division
Cash Balance in Insurance Fund

June 1990 through June 2001

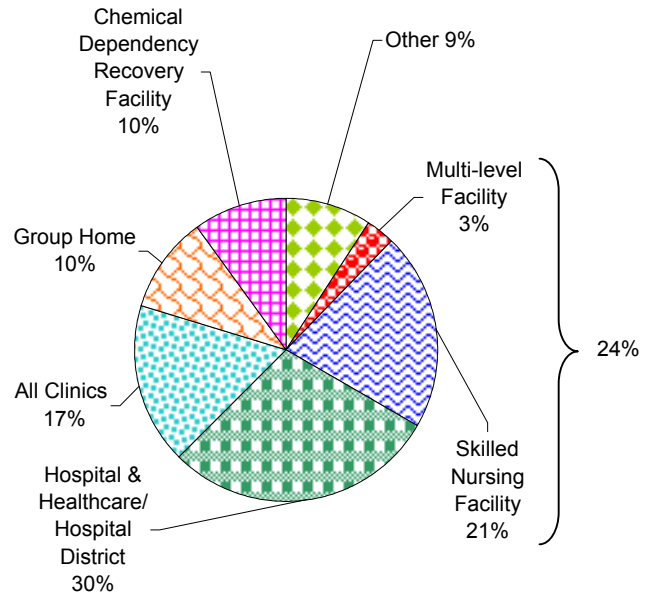


Cal-Mortgage Loan Insurance Division
Office of Statewide Health Planning and Development
Percentage of Types of Projects, by Total Number Insured
(as of June 30, 2001)

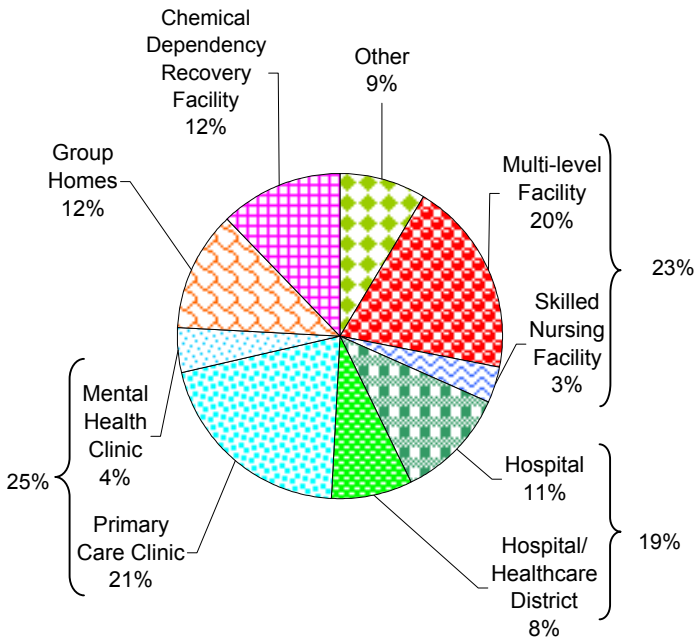
February 1992
Total Number of Insured
Projects: 172



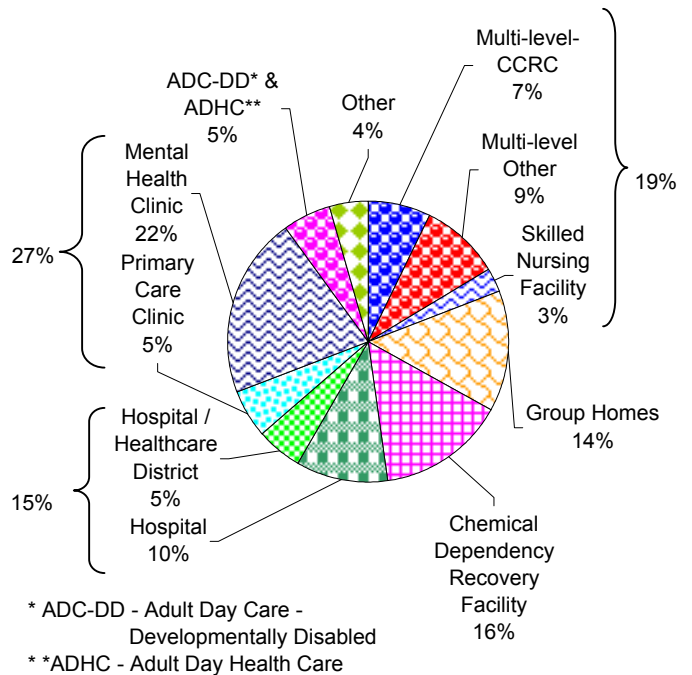
July 1995
Total Number of Insured
Projects: 222



June 1998
Total Number of Insured
Projects: 206



June 2001
Total Number of Insured
Projects: 182

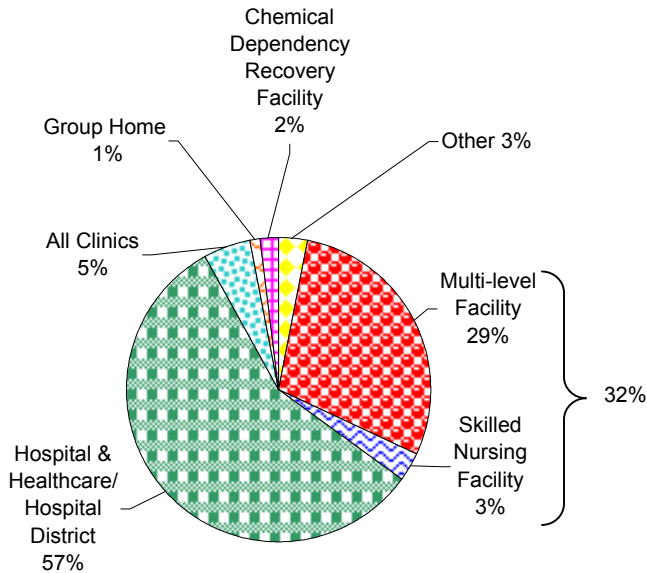


* ADC-DD - Adult Day Care - Developmentally Disabled

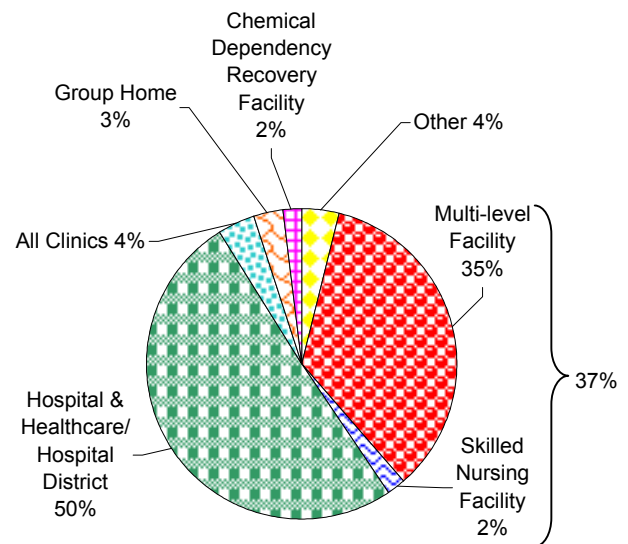
**ADHC - Adult Day Health Care

Cal-Mortgage Loan Insurance Division
Office of Statewide Health Planning and Development
Percentage of Types of Projects, by Total Amount Insured
(as of June 30, 2001)

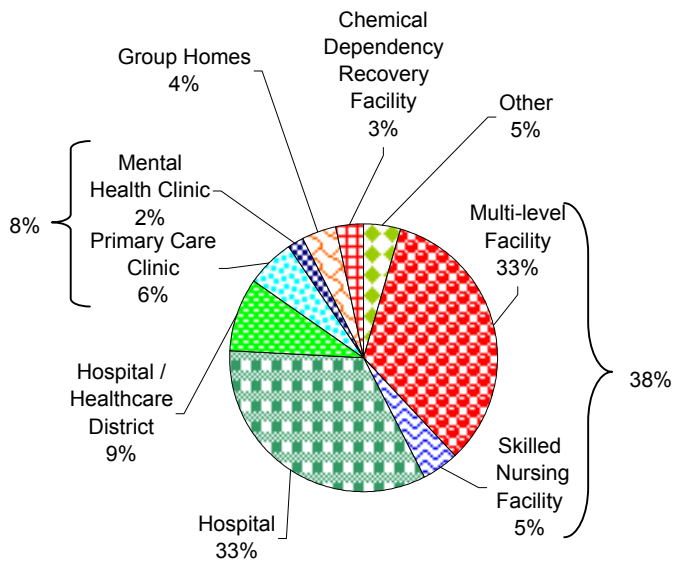
February 1992
Total Amount Insured:
\$1,868,723,454



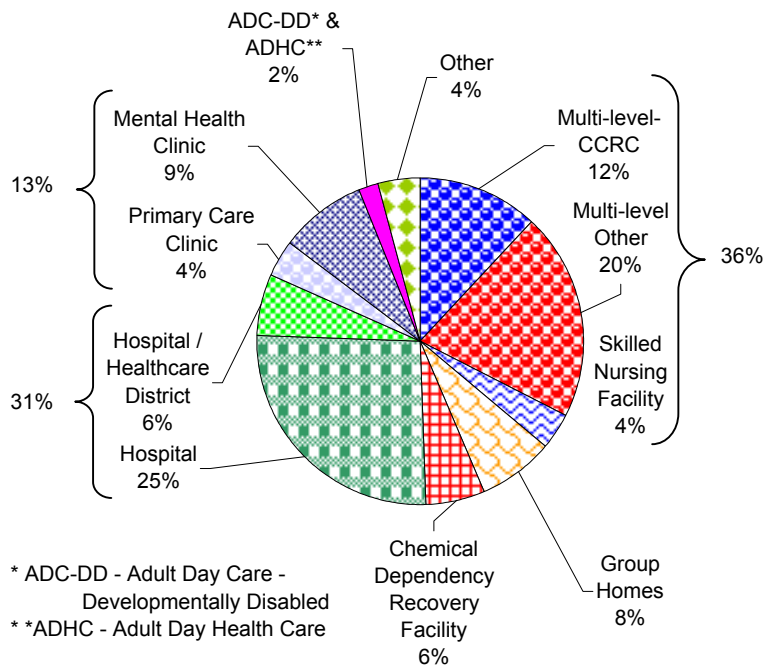
July 1995
Total Amount Insured:
\$2,050,945,343



June 1998
Total Amount Insured:
\$1,626,319,299



June 2001
Total Amount Insured:
\$1,036,000,000



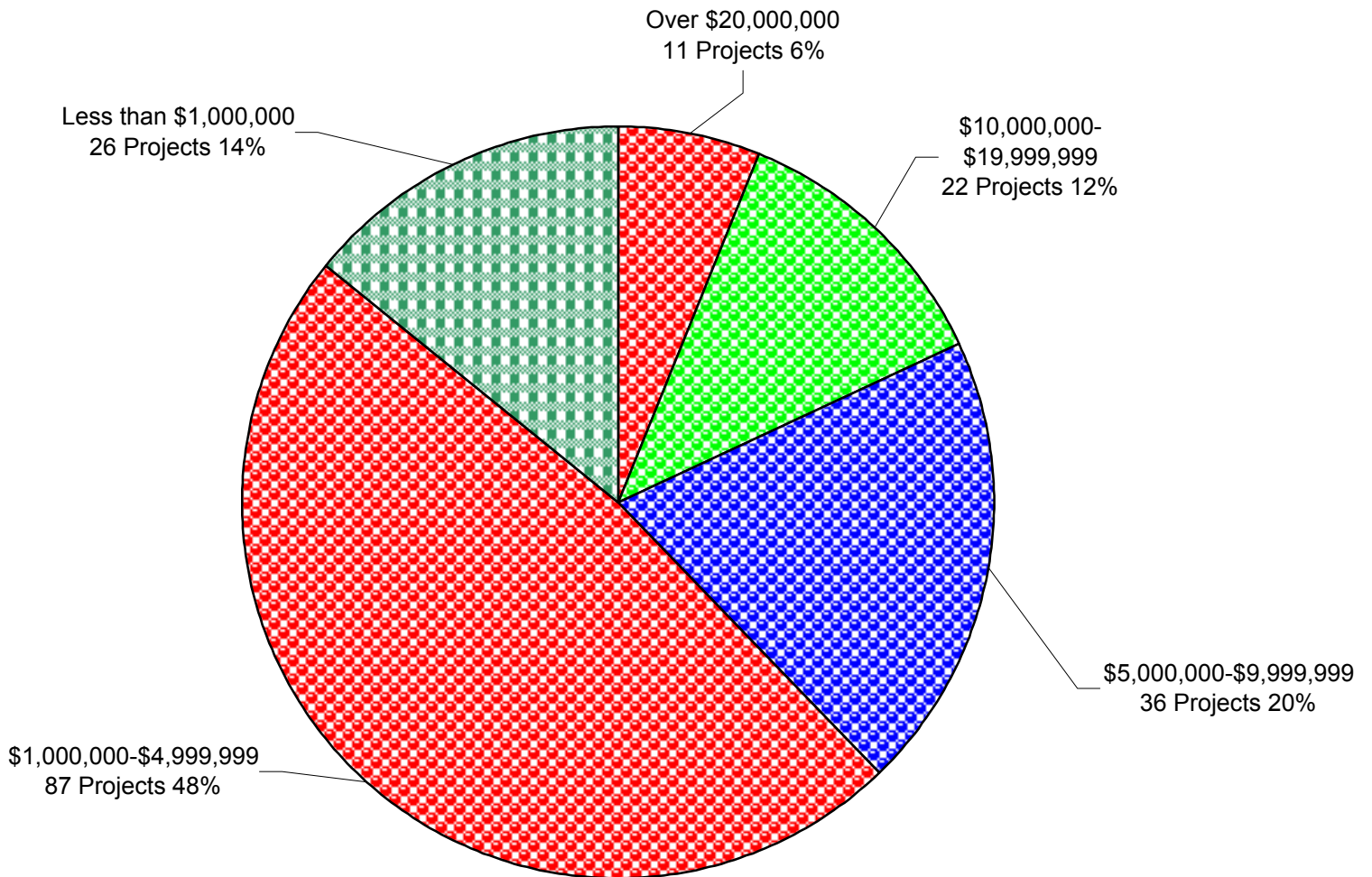
* ADC-DD - Adult Day Care - Developmentally Disabled
**ADHC - Adult Day Health Care

Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division

Exhibit 17

Number of Insured Projects by Size of Insured Amount


as of June 30, 2001




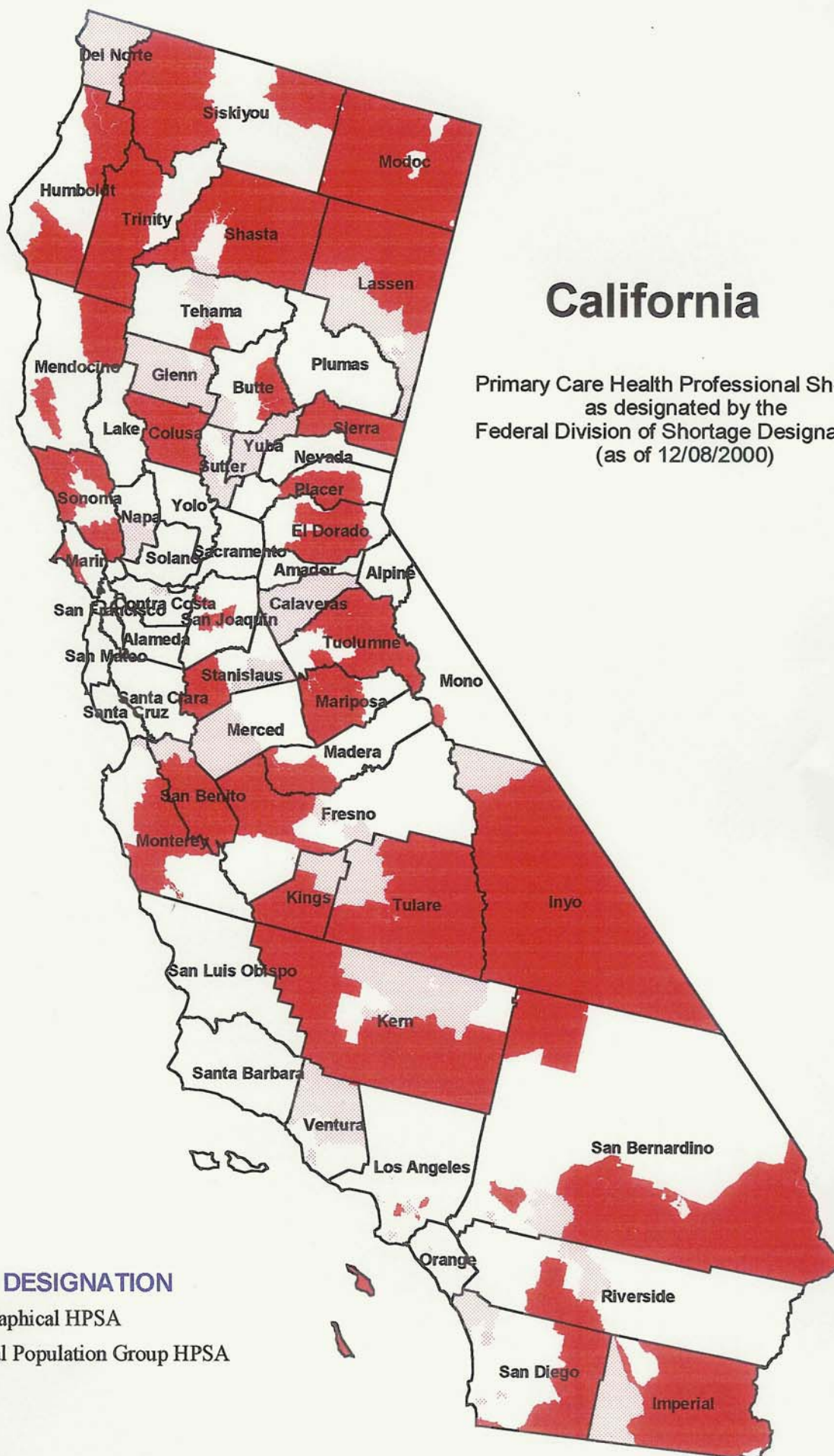
California

Primary Care Health Professional Shortage Areas
as designated by the
Federal Division of Shortage Designation
(as of 12/08/2000)

DESIGNATION

 Geographical HPSA

 Special Population Group HPSA

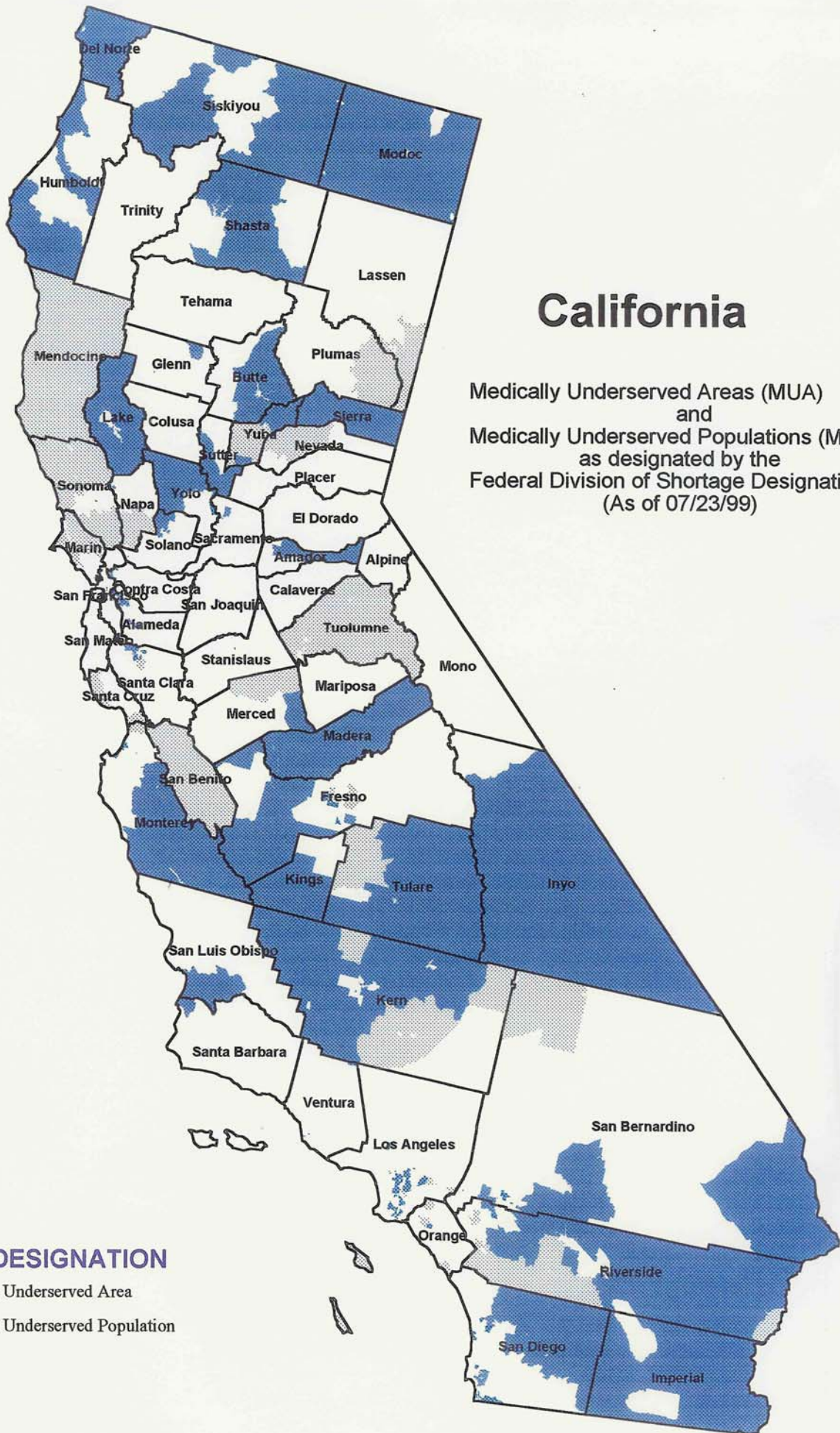


California

Mental Health Professional Shortage Areas
as designated by the
Federal Division of Shortage Designation
(as of 11/24/2000)







OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT**CAL-MORTGAGE LOAN INSURANCE DIVISION**

300 Capitol Mall, Suite 1500

Sacramento, California 95814

(916) 324-9957 FAX (916) 445-2837 or (916) 327-5688



February 6, 2002

«FirstName» «LastName»

«JobTitle»

«Company»

«Address1»

«Address2»

«City», «State» «PostalCode»

**Sample Letter
Insured Borrower**Subject: **Draft 2001 State Plan**

Dear Mr. or Ms. «LastName»:

The Cal-Mortgage Loan Insurance Division (**Cal-Mortgage**) of the Office of Statewide Health Planning and Development (**OSHDP**) has completed its Draft 2001 State Plan. The Draft 2001 State Plan is now available for public review and comment. You may obtain a copy of the Draft 2001 State Plan by completing and returning the attached request form to Cal-Mortgage (or by email to gfribanc@oshpd.state.ca.us).

The Draft 2001 State Plan is a replacement of the 1995 State Plan. The purpose of the State Plan is to provide a frame of reference for OSHPD to assess applications for loan insurance and to focus the California Health Facilities Construction Loan Insurance Program on equitable health care accessibility for California.

Comments on the Draft 2001 State Plan may be submitted to Cal-Mortgage at the address at the top of this letterhead by 5 PM, Friday, March 29, 2002.

After comments are reviewed, a Final 2001 State Plan will be prepared and distributed.

A copy of the Final 2001 State Plan may be obtained by checking the appropriate box on the attached request form and returning the request form to Cal-Mortgage.

If you need further information or have questions, please contact George Fribance at (916) 327-2254 or gfribanc@oshpd.state.ca.us.

Sincerely,

A handwritten signature in cursive script that reads 'Dale A. Flournoy'.

Dale A. Flournoy
Deputy Director

February 6, 2002
Page 2

- *Mail or Fax to:* Cal-Mortgage, 300 Capitol Mall, Suite 1500, Sacramento, CA 95814
Fax (916) 445-2837

___ Please send a copy of the "Draft" 2001 State Plan (currently available)

___ Please send a copy of the "Final" 2001 State Plan (when approved)

Send to: [Name]_____

«Company»

«Address1»

«Address2»

«City», «State» «PostalCode»

OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT**CAL-MORTGAGE LOAN INSURANCE DIVISION**

300 Capitol Mall, Suite 1500

Sacramento, California 95814

(916) 324-9957 FAX (916) 445-2837 or (916) 327-5688



February 5, 2002

«FirstName» «LastName»

«JobTitle»

«Company»

«Address1»

«Address2»

«City», «State» «PostalCode»

**Sample Letter
General Notice with Copy**Subject: **Draft 2001 State Plan**

Dear Mr. or Ms. «LastName»:

The Cal-Mortgage Loan Insurance Division (**Cal-Mortgage**) of the Office of Statewide Health Planning and Development (**OSHDP**) has completed its Draft 2001 State Plan. Enclosed is a copy of the Draft 2001 State Plan for your review and comment.

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If you need further information or have questions, please contact George Fribance at (916) 327-2254 or gfribanc@oshpd.state.ca.us.

Sincerely,

A handwritten signature in cursive script that reads 'Dale A. Flourney'.

Dale A. Flourney
Deputy Director

Enclosure